

American National Standard



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practices for respiratory protection



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**American National Standard
Practices for Respiratory Protection**

Sponsor

**U. S. Department of the Interior
Bureau of Mines**

Approved August 11, 1969

American National Standards Institute, Inc

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American National Standard

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Foreword

(This Foreword is not part of American National Standard Practices for Respiratory Protection, Z88.2-1969.)

This is a revision of the respiratory protection portion of American National Standard Safety Code for Head, Eye, and Respiratory Protection, Z2.1-1959. The United States Department of the Interior, Bureau of Mines, which acted as cosponsor of Z2.1-1959, accepted sponsorship of the project on respiratory protection when it was deemed advisable to separate the portions of that Z2.1 standard. A Z88 Standards Committee was organized and met on September 24, 1963, to review the section of Z2.1-1959 dealing with respiratory protection. The Committee decided to revise and rewrite that section. The fifth draft of the proposed standard was submitted to letter ballot and accepted by the Z88 Committee on May 2, 1969. It was approved as an American National Standard on August 11.

Since questions may arise from time to time concerning interpretation of this standard, an Interpretation and Review Committee has been established, to provide for the uniform handling of doubtful cases. Anyone using this standard and desiring an interpretation may communicate with the Standards Institute. The Committee will also review new developments in respiratory protection and determine the need for revision or supplementation of this standard.

Suggestions for improvement gained in the use of this standard will be welcome. They should be sent to the American National Standards Institute, 1430 Broadway, New York, N.Y. 10018.

The Z88 Standards Committee had the following personnel at the time it approved this standard.

Robert H. Schutz, *Chairman*

Francis X. Worden, *Secretary*

<i>Organization Represented</i>	<i>Name of Representative</i>
American Conference of Governmental Industrial Hygienists	E. C. Hyatt
American Foundrymen's Society	William B. Huelson
American Gas Association	T. L. Powers
	H. W. Becker (<i>Alt</i>)
American Industrial Hygiene Association	E. C. Hyatt
	W. H. Revoir (<i>Alt</i>)
American Insurance Association	Robert R. Conroy
	Victor Bohn (<i>Alt</i>)
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	Benjamin Smilg
	Harley N. Trice
	Charles N. Sumwalt (<i>Alt</i>)
	Howard M. Weiss (<i>Alt</i>)
International Association of Fire Chiefs	Raymond J. Brady
	Donald M. O'Brien (<i>Alt</i>)
International Association of Governmental Labor Officials	Martin Slotkin
National Safety Council	H. H. Fawcett
	Julian B. Olishifski (<i>Alt</i>)
Telephone Group	F. X. Worden
U. S. Atomic Energy Commission	Carl G. Welty, Jr
	Humphery Gilbert (<i>Alt</i>)

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<i>Organization Represented</i>	<i>Name of Representative</i>
U. S. Coast Guard	Norman W. Lemley
U. S. Department of Agriculture	Rolland M. Waters
U. S. Department of the Army	Robert A. Duguid
	Harry H. Ackerman (<i>Alt</i>)
U. S. Department of the Interior	Robert H. Schutz
	E. J. Kloos (<i>Alt</i>)
U. S. Department of Labor	G. Walker Daubenspeck
	John O'Neill (<i>Alt</i>)
U. S. Department of the Navy	Samuel H. Barboo, Jr
	N. E. Rosenwinkel (<i>Alt</i>)
U. S. Public Health Service (<i>Liaison</i>)	Howard E. Ayer
	Charles H. Powell (<i>Alt</i>)
Individual Member	William E. Clark

The subcommittee which prepared the final draft on this standard had the following personnel.

Carl G. Welty, Jr, *Chairman*

H. H. Ackerman
Raymond J. Brady
R. H. Burr

H. H. Fawcett
E. C. Hyatt
W. H. Revoir

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American National Standard Practices for Respiratory Protection

1. Introduction

This standard sets forth accepted practices for respirator users. It provides information and guidance on the proper selection, use, and care of respirators and sets forth recommended requirements suitable for adoption into regulations governing their use.

1.1 Scope. The scope of this standard includes safe practices and requirements for using respirators for protection of the respiratory system from inhalation of particulate matter, noxious gases and vapors, and oxygen deficiency. *Excluded* are 1) underwater protection, 2) high-altitude aircraft oxygen systems, and 3) protection against military munitions. Although the standard does not cover engineered protective measures (for example, ventilation), exposure control shall be accomplished as far as is feasible by accepted engineering methods before considering or instituting use of respirators.

1.2 Purpose. The standard is intended to provide guidance that will assist respirator users in safeguarding health and life through proper selection and use of respirators. Use of respirators implies that the wearer needs protection from an atmosphere that might threaten his life or health. Therefore, it is imperative that the level of protection needed be determined and provided in both normal and emergency conditions of use, particularly if exposure to the atmosphere could be immediately dangerous to life or health. Use of respirators in atmospheres that are dangerous to life or health is discussed in 6.3.

1.3 "Shall" and "Should". The provisions of this standard are mandatory in nature where the word "shall" is used and advisory in nature where the word "should" is used.

1.4 Exceptions. Exceptions to the requirements in Section 3, Recommended Requirements for Codes, may be granted by competent authority, provided that an equally acceptable mode and degree of protection is afforded.

2. Definitions

abrasive-blasting respirator. See *respirator*.

aerodynamic diameter. The diameter of a unit density sphere having the same settling velocity as the particle in question of whatever shape and density.

air-line respirator. See *respirator*.

air-purifying respirator. See *respirator*.

air-regulating valve. An adjustable valve used to regulate airflow to the facepiece, helmet, or hood of an air-line respirator.

air-supply device. A hand- or motor-operated blower for the hose mask, or a compressor or other source of respirable air for air-line and abrasive-blasting respirators.

approved. Tested and listed as satisfactory by an authority having jurisdiction, such as U.S. Department of the Interior, Bureau of Mines, or U.S. Department of Agriculture.

breathing tube. A tube through which air or oxygen flows to the facepiece, helmet, or hood.

canister (air-purifying). A container filled with sorbents and catalysts that remove gases and vapors from air drawn through the unit. The canister may also contain an aerosol (particulate) filter to remove solid or liquid particles.

canister (oxygen-generating). A container filled with a chemical which generates oxygen by chemical reaction.

cartridge. A small container filled with air-purifying media.

catalyst. In respirator use, a substance which converts a toxic gas (or vapor) into a less-toxic gas (or vapor).

chemical-cartridge respirator. See *respirator*.

contaminant. A harmful, irritating, or nuisance material that is foreign to the normal atmosphere.

corrective lens. A lens ground to the wearer's individual corrective prescription.

detachable coupling. A device by means of which the respirator wearer, without using hand-

tools, may detach the air-supply line from that part of the respirator worn on the person or from the air-supply source.

disinfection. The destruction and removal of pathogenic organisms, especially by means of chemical substances.

dust. See Table 2.

exhalation valve. A device that allows exhaled air to leave a respirator and prevents outside air from entering through the valve.

eyepiece. A gastight, transparent window(s) in a full facepiece through which the wearer may see.

facepiece. That portion of a respirator that covers the wearer's nose and mouth in a half-mask facepiece or nose, mouth, and eyes in a full facepiece. It is designed to make a gas-tight or dust-tight fit with the face and includes the headbands, exhalation valve(s), and connections for air-purifying device or respirable-gas source or both.

filter respirator. See *respirator*.

filter. A fibrous media (canned or uncanned) used in respirators to remove solid or liquid particles from the airstream entering the respirator enclosure.

fog. See Table 2.

full facepiece. See *facepiece*.

fume. See Table 2.

gas. An aeriform fluid which is in the gaseous state at ordinary temperature and pressure.

gas mask. See *respirator*.

half-mask facepiece. See *facepiece*.

head harness. a device for holding the facepiece securely in place on the wearer's head.

helmet. A device that shields the eyes, face, neck, and other parts of the head.

hood. A device that completely covers the head, neck, and portions of the shoulders.

hose mask. See *respirator*.

immediately dangerous to life or health. Included are conditions that pose an immediate threat to life or health and conditions that pose an immediate threat of severe exposure to contaminants such as radioactive materials which are likely to have adverse delayed effects on health.

inhalation valve. A device that allows respirable air to enter the facepiece and prevents exhaled

air from leaving the facepiece through the intake opening.

irrespirable. Unfit for breathing.

mist. See Table 2.

MPC. Maximum permissible concentration. These concentrations are set by the National Committee on Radiation Protection. They are recommended maximum average concentrations of radionuclides to which a worker may be exposed, assuming that he works 8 hours a day, 5 days a week, and 50 weeks a year.

~~particulate matter~~. A suspension of fine solid or liquid particles in air, such as dust, fog, fume, mist, smoke, or sprays. Particulate matter suspended in air is commonly known as an aerosol.

~~pneumoconiosis-producing~~ dust. Dust, which when inhaled, deposited, and retained in the lungs, may produce signs, symptoms and findings of pulmonary disease.

resistance. Opposition to the flow of air, as through a canister, cartridge, particulate filter, or orifice.

respirable. Fit to be breathed.

respirator. A device designed to protect the wearer from inhalation of harmful atmospheres. See Section 5, Classification, Description, and Limitations of Respirators.

self-contained breathing apparatus. See *respirator*.

sorbent. A material which removes toxic gases and vapors from air inhaled through a canister or cartridge.

spray. See Table 2.

supplied-air respirator. See *respirator*.

supplied-air suit. A one- or two-piece suit that is impermeable to most particulate and gaseous contaminants and is provided with an adequate supply of respirable air.

~~TLV: Threshold~~ limit value. A table of these values and accompanying precautions is published annually by the American Conference of Governmental Industrial Hygienists.

~~toxic dust~~. Dust that may be harmful to the respiratory system or to other parts of the body through passing from the respiratory tract into the blood stream.

valve (air or oxygen). A device which controls the direction of air or oxygen flow or the rate and pressure at which air or oxygen is delivered, or both.

vapor. The gaseous state of a substance that is solid or liquid at ordinary temperature and pressure.

window indicator. A colorimetric indicator for gas mask canisters which denotes the service life for a particular gas.

3. Recommended Requirements for Codes

3.1 Purpose. This section includes recommended requirements for authorities considering establishment of respirator regulations or codes. The following recommended requirements are supplemented by recommended practices in subsequent sections of this standard.

3.2 Permissible Practice. In the control of those occupational diseases caused by breathing air contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors, *the primary objective shall be to prevent atmospheric contamination.* This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used pursuant to the following requirements.

3.3 Employer Responsibility

3.3.1 Respirators shall be provided by the employer when such equipment is necessary to protect the health of the employee.

3.3.2 The employer shall provide the respirators which are applicable and suitable for the purpose intended.

3.3.3 The employer shall be responsible for the establishment and maintenance of a respiratory protective program which shall include the general requirements outlined in 3.5.

3.4 Employee Responsibility

3.4.1 The employee shall use the provided respiratory protection in accordance with instructions and training received.

3.4.2 The employee shall guard against damage to the respirator.

3.4.3 The employee shall report any malfunction of the respirator to the responsible person.

3.5 Minimal Acceptable Program

3.5.1 Written standard operating procedures governing the selection and use of respirators shall be established.

3.5.2 Respirators shall be selected on the basis of hazards to which the worker is exposed. See Section 4, *Classification of Respiratory Hazards*.

3.5.3 The user shall be instructed and trained in the proper use of respirators and their limitations. See 7.4 and 7.5.

3.5.4 Where practicable, the respirators should be assigned to individual workers for their exclusive use.

3.5.5 Respirators shall be regularly cleaned and disinfected. Those issued for the exclusive use of one worker should be cleaned after each day's use, or more often if necessary. Those used by more than one worker shall be thoroughly cleaned and disinfected after each use. See 8.3.

3.5.6 Respirators shall be stored in a convenient, clean, and sanitary location. See 8.5.

3.5.7 Respirators used routinely shall be inspected during cleaning. Worn or deteriorated parts shall be replaced. Respirators for emergency use such as self-contained devices shall be thoroughly inspected at least once a month and after each use. See 8.2.

3.5.8 Appropriate surveillance of work area conditions and degree of employee exposure or stress shall be maintained. See 6.3.4 and 10.4.

3.5.9 There shall be regular inspection and evaluation to determine the continued effectiveness of the program. See Section 8, *Maintenance and Care of Respirators*, and Section 10, *Evaluation of Respirator Program Effectiveness*.

3.6 Program Administration. The plant or company industrial hygiene, health physics, safety engineering, or fire department shall administer the program in close liaison with the plant medical department. Responsibility for the program shall be vested in one individual. In small plants having no formal industrial hygiene, health physics, safety, fire, or medical department, the respirator program shall be administered by an upper-level superintendent, foreman, or other qualified individual responsible to the principal manager. The administrator shall have sufficient knowledge of the subject to properly supervise the program.

Table 1
Classification of Respiratory Hazards According to Their Biological Effect

Oxygen Deficiency	Gas and Vapor Contaminants	Particulate Contaminants (Dust, fog, fume, mist, smoke, and sprays)
Occurrence: Confined or unventilated cellars, wells, mines, ship holds, tanks, burning buildings, and enclosures containing inert atmospheres. (See Note 1.) Atmospheric O₂ content (percent by volume) versus expected conditions: 20.9 percent: Oxygen content of normal air. 16 percent: Flame of safety lamp or ordinary combustibles extinguished, and symptoms of anoxia begin to appear in humans.	Asphyxiants: Interfere with utilization of O₂ in the body. Simple asphyxiants: Physiologically inert substances that dilute O₂ in the air (for example, nitrogen, hydrogen, helium, methane). See Oxygen Deficiency, Column 1. Chemical asphyxiants: Low concentrations interfere with supply or utilization of O₂ in the body (for example, carbon monoxide, hydrogen cyanide, cyanogen and nitriles). Irritants: Corrosive in action. May cause irritation and inflammation of parts of the respiratory system (also skin and eyes) and pulmonary edema (for example, ammonia, hydrogen chloride, formaldehyde, sulfur dioxide, chlorine, ozone, nitrogen dioxide, phosgene, and arsenic trichloride). Anesthetics: Cause loss of feeling and sensation with unconsciousness and death possible (for example, nitrous oxide, hydrocarbons and ethers). Some anesthetics injure body organs; for example, carbon tetrachloride (liver and kidneys), chloroform (liver and heart), benzene (bone marrow), and carbon disulfide (nervous system). Systemic poisons: Damage organs and systems in the body; for example, mercury (nervous system and various organs), phosphorous (bone), hydrogen sulfide (respiratory paralysis), and arsine (red blood cells and liver). Combinations of Gas, Vapor, and Particulate Contaminants Combinations of contaminants may occur simultaneously in the atmosphere. Contaminants may be entirely different substances (dusts and gases from blasting) or the particulate and vapor forms of the same substance. Synergistic effects (joint action of two or more agents that results in an effect which is greater than the sum of their individual effects) may occur. Such effects may require extraordinary protective measures.	Relatively inert: May cause discomfort and minor irritation, but generally without injury at reasonable concentrations (for example, marble, gypsum). Pulmonary fibrosis-producing: Produce nodulation and fibrosis in the lung, possibly leading to complications (for example, quartz, cristobalite, tridymite, asbestos). Cancer-producing: Produce cancer in some individuals after "latent" period of 20-40 years (for example, asbestos, chromates, radioactive particulates). Chemical irritants: Produce irritation, inflammation, ulceration, and so forth, in upper respiratory tract (for example, acid mists, alkalis). Systemic poisons: Produce pathologic reactions in various systems of the body (for example, lead, manganese, cadmium). Allergy-producing: Produce reactions such as itching, sneezing and asthma (for example, pollens, isocyanates, gums, spices). Febrile reaction-producing: Produce chills followed by fever (for example, fumes of zinc and copper).

NOTE 1: The adverse effects of oxygen deficiency increase with decreasing atmospheric pressure or increased altitude.

NOTE 2: Conditions Immediately Dangerous to Life or Health (see Section 2, Definitions) may result from most of the above hazards with the probable exception of nuisance or low toxicity dusts. Such conditions constitute atmospheres that would rapidly lead to death or to injury that would eventually impair health. For example, a ten-minute exposure to 120 parts per million (ppm) of phosgene may be fatal, and exposure to very high concentrations of a radioactive material such as plutonium 239 could present a danger to health from delayed effects of radiation damage to body tissues.

3.7 Medical Limitations. Persons should not be assigned to tasks requiring use of respirators unless it has been determined that they are physically able to perform the work and use the equipment. The local physician shall determine what health and physical conditions are pertinent. The respirator user's medical status should be reviewed periodically (for instance, annually).

3.8 Approval. Approved or accepted respirators shall be used when they are available (see Section 6, Selection of Respirators). The respirator furnished shall provide adequate respiratory protection against the particular hazard for which it is designed in accordance with standards established by competent authorities. The U. S. Department of the Interior, Bureau of Mines, and the U. S. Department of Agriculture are recognized as such authorities. (See Appendix, Respirator Approval and Acceptance Listings.) Although respirators listed by the U.S. Department of Agriculture continue to be acceptable for protection against specified pesticides, the U. S. Department of the Interior, Bureau of Mines, is the agency now responsible for testing and approving pesticide respirators.

4. Classification of Respiratory Hazards

4.1 Introduction. The purpose of this section is to list and briefly describe various categories of respiratory hazards that might be encountered and which may require use of respirators. The information provides a general background for relating the guidance in subsequent sections to the type of hazard encountered. Management, however, will find it necessary to consult references on industrial hygiene and toxicology and perhaps expert individuals to develop the necessary comprehensive information on specific airborne contaminants.

Respiratory hazards for the purpose of this standard, are classified as follows:

- (1) oxygen deficiency
- (2) gas and vapor contaminants
 - (a) immediately dangerous to life or health
 - (b) not immediately dangerous to life or health
- (3) particulate contaminants (dust, fog, fume, mist, smoke, and spray)
 - (a) immediately dangerous to life or health
 - (b) not immediately dangerous to life or health

(4) combination of gas, vapor, and particulate contaminants

- (a) immediately dangerous to life or health
- (b) not immediately dangerous to life or health

Respirators may afford some protection against high temperature atmospheres. See 9.4. Further information on the hazards of and use of respirators in high temperatures is presented in a National Fire Protection Association publication, *Breathing Apparatus for The Fire Service*, published in 1966.

4.2 Classification and Description of Respiratory Hazards. The basic respiratory hazards listed in 4.1 are classified in Table 1 according to expected biological effects of the contaminants. Many respirators, particularly air-purifying respirators, are designed and selected on the basis of chemical and physical properties of the air contaminants. Therefore, gas, vapor, and particulate contaminants are also presented in Table 2 according to their physical and chemical properties.

Particle size distribution and solubility are important parameters for particulate contaminants. Particles smaller than 5 microns in aerodynamic diameter more readily reach the lungs and are more readily dissolved and absorbed into the bloodstream or deposited on lung tissue. The solubility of the material usually determines whether the resulting toxic effect, if any, is in the lungs or other organs. Particles larger than 5 microns aerodynamic diameter are generally trapped in the upper respiratory tract, cleared, and swallowed with possible subsequent absorption from the gastrointestinal tract, depending on their solubility.

5. Classification, Description, and Limitations of Respirators

5.1 Introduction. The purpose of this section is to provide a description of the various types of respirators, their limitations, and capabilities, as a background for subsequent sections which discuss their selection, use, and maintenance.

Respirators fall into the following general classifications, according to mode of operation:

- (1) atmosphere-supplying respirators
 - (a) self-contained
 - (b) hose-mask
 - (c) air-line
 - (d) combination self-contained and hose-mask or air-line

- (2) air-purifying respirators
 - (a) gas and vapor (gas mask and chemical cartridge)
 - (b) particulate (dust, fog, fume, mist, smoke, and sprays)
 - (c) combination gas, vapor, and particulate
- (3) combination atmosphere-supplying and air-purifying respirators

5.2 Classification, Description and Limitations of Respirators. This information is presented in two tables. Table 3 covers the classification and description of respirators according to the general classifications in 5.1. Table 4 covers capabilities and limitations of respirators arranged to correspond to the subject headings in Table 3.

More detailed information on specific types of respirators can be obtained from respirator manufacturers and from the *Respiratory Protective Devices Manual* published by the American Industrial Hygiene Association and the American Conference of Governmental Industrial Hygienists in 1963.

The canister color code table from American National Standard Identification of Gas Mask Canisters, K13.1-1967, is provided in Table 5. The code indicates the colors assigned to canisters to identify the types of atmospheric contaminants against which they will protect.

5.3 Respirable Air and Oxygen for Self-Contained Breathing Apparatus and Hose-Type Respirators. Compressed air, compressed oxygen, liquid air, and liquid oxygen used for res-

Table 2
Classification of Respiratory Hazards According to Their Properties
which Influence Respirator Selection

Gas and Vapor Contaminants	Particulate Contaminants
Inert: They do not react with other substances under most conditions and create a respiratory hazard by displacing air and producing oxygen deficiency (for example, helium, neon, argon). Acidic: Substances that are acids or that react with water to produce an acid. In water they produce positively charged hydrogen ions. They taste sour and many are corrosive to tissues (for example, hydrogen chloride, sulfur dioxide, fluorine, nitrogen dioxide, acetic acid, carbon dioxide, hydrogen sulfide, and hydrogen cyanide). Alkaline: Substances that are alkalies or that react with water to produce an alkali. When in water solutions, they result in the production of negatively charged hydroxyl ions (OH^-). They taste bitter, and many are corrosive to tissues (for example, ammonia, amines, phosphine, arsine, and stibine). Organic: These are the compounds of carbon. Examples are saturated hydrocarbons (methane, ethane, butane), unsaturated hydrocarbons (ethylene, acetylene), alcohols (methyl alcohol, propyl alcohol), ethers (methyl ether, ethyl ether), aldehydes (formaldehyde), ketones (dimethyl ketone), organic acids (formic acid, acetic acid), halides (chloroform, carbon tetrachloride), amides (formamide, acetamide), nitriles (acetonitrile), isocyanates (toluene diisocyanate), amines (methylamine), epoxies (epoxyethane, propylene oxide), and aromatics (benzene, toluene, xylene). Organometallic: Compounds in which metals are chemically bonded to organic groups (for example, ethyl silicate, tetraethyl lead, and organic phosphates). Hydrides: Compounds in which hydrogen is chemically bonded to metals and certain other elements (for example, diborane and lithium hydride).	Particles are produced by mechanical means by the disintegration processes of grinding, crushing, drilling, blasting, and spraying; or by the physiochemical reactions such as combustion, vaporization, distillation, sublimation, calcination, and condensation. Particles are classified as follows: Dust: A solid mechanically produced particle with sizes varying from submicroscopic to visible or macroscopic. Spray: A liquid mechanically produced particle with sizes generally in the visible or macroscopic range. Fume: A solid condensation particle of extremely small particle size, generally less than one micron in diameter. Mist: A liquid condensation particle with sizes ranging from submicroscopic to visible or macroscopic. Fog: A mist of sufficient concentrate to perceptibly obscure vision. Smoke: A system which includes the products of incomplete combustion of organic substances in the form of solid and liquid particles and gaseous products in air. Smoke is usually of sufficient concentration to perceptibly obscure vision.

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piration shall be of high purity. Oxygen shall meet the requirements of the United States Pharmacopoeia for medical or breathing oxygen. Breathing air shall meet at least the requirements of the specification for Grade D breathing air as described in Compressed Gas Association Commodity Specification G-7.1-1966.

Compressed oxygen shall not be used in supplied-air respirators or in open-circuit self-contained breathing apparatus that have previously used compressed air. Compressed air might contain low concentrations of oil. When high-pressure oxygen passes through an oil- or grease-coated orifice, an explosion or fire may occur.

Breathing air may be supplied to respirators from cylinders or air compressors. Cylinders shall be tested and maintained in accordance with applicable Department of Transportation or Interstate Commerce Commission Specifications for shipping containers. Compressors shall be constructed and situated so as to avoid entry of contaminated air into the system and suitable in-line air purifying sorbent beds and filters installed to further assure breathing air quality. A receiver of sufficient capacity to enable the respirator wearer to escape from a contaminated atmosphere in event of compressor failure, and alarms to indicate compressor failure and overheating shall be installed in the system (see 6.3.2). Air-line couplings shall be incompatible with outlets for other gas systems to prevent inadvertent servicing of air-line respirators with nonrespirable gases or oxygen.

Breathing-gas containers shall be marked in accordance with American National Standard Method of Marking Portable Compressed Gas Containers to Identify the Material Contained, Z48.1-1954; Federal Specification BB-A-1034a, June 21, 1968, Air, Compressed for Breathing Purposes; or Interim Federal Specification GG-B-00675b, April 27, 1965, Breathing Apparatus, Self-Contained. Further details on sources of compressed air and its safe use will be found in Compressed Gas Association Pamphlet G-7-1968.

6. Selection of Respirators

6.1 Approved or Accepted Respirators. Whenever possible, approved or accepted respirators shall be used. Respirator approval and acceptance tests and listings and selection of other than approved or accepted respirators are discussed in the Appendix.

6.2 General Considerations. The multiplicity of hazards that may exist in a given operation requires careful and intelligent respirator selection. This selection is made even more complex by the many types of respirators available. Each type has its limitations, areas of application, and operational and maintenance requirements.

The selection of a proper respirator for any given situation requires consideration of the following factors: 1) nature of the hazard (see Section 4); 2) extent of the hazard; 3) work requirements and conditions; and 4) characteristics and limitations of available respirators (see Section 5).

Table 6 is a quick reference guide for the selection of respiratory protection appropriate to the type and degree of hazard. The Table provides minimal guidance, however, and shall be used along with other information, such as that given in this standard and in directions provided by respirator manufacturers.

When there is doubt about the concentration of oxygen or hazardous material present in the atmosphere, only those respirators listed as suitable for respiratory protection against oxygen deficiency shall be used. Any erring in the selection of respirators shall be on the safe side.

6.3 Nature of the Hazard. The chemical and physical properties, toxicity, and concentration of the hazardous material shall be considered in respirator selection (see Section 4 for classifications and discussion of respiratory hazards).

6.3.1 Oxygen-Deficient Atmospheres. Only respirators that provide an independent, respirable atmosphere shall be used in oxygen-deficient atmospheres. Normally, a self-contained breathing apparatus, hose mask with blower, or air-line respirator with auxiliary self-contained air supply is used for this purpose. Air-line respirators without auxiliary air supply shall be used only with the precautions outlined in 6.3.2.

An attendant shall be standing by at the entrance to the oxygen-deficient atmosphere at all times with proper communications and rescue equipment in case of an emergency. See 7.3 for use of respirators in oxygen-deficient atmospheres.

6.3.2 Immediately Dangerous Atmospheres. If it is probable that atmospheres immediately dangerous to life or health may occur, then both the normally expected inward leakage (see 6.3.3) and the reliability of the respirator shall

Table 3
Classification and Description of Respirators by Mode of Operation

Atmosphere-Supplying Respirators	Air-Purifying Respirators
A respirable atmosphere independent of the ambient air is supplied to the wearer. Self-Contained Breathing Apparatus (SCBA) Supply of air, oxygen, or oxygen-generating material carried by wearer. Normally equipped with full facepiece, but some with a mouthpiece for escape purposes. (1) Closed-Circuit SCBA (oxygen only) (a) Compressed or liquid oxygen type. High-pressure O₂ from a gas cylinder passes through a high-pressure reducing valve and, in some designs, through a low-pressure admission valve to a breathing bag or container. Liquid oxygen is converted to a low-pressure gaseous oxygen and delivered to the breathing bag. The wearer inhales from the bag through a corrugated tube connected to a mouthpiece or facepiece and a one-way check valve. Exhaled air passes through another check valve and tube into a container of carbon dioxide removing chemical and reenters the breathing bag. Make up O₂ enters the bag continuously or as the bag deflates sufficiently to actuate an admission valve. A pressure relief system is provided and a manual bypass system and saliva trap may be provided depending upon the design. (b) Oxygen-generating type. Water vapor in the exhaled breath reacts with chemical in the canister to release O₂ to the breathing bag. The wearer inhales from the bag through a corrugated tube and one-way check valve at the facepiece. Hose Mask and Air-Line Respirator (1) Hose Mask Equipped with full facepiece, non-kinking breathing tube, rugged safety harness and a large diameter heavy-duty nonkinking air supply hose. The breathing tube and hose are securely attached to the harness. A check valve allows airflow only toward the facepiece. The facepiece is fitted with an exhalation valve. The harness has provision for attaching a safety line. (a) Hose mask with blower. Air is supplied by a motor-driven or hand-operated blower. The wearer can continue to inhale through the hose if the blower fails. Up to 300 feet of hose length is permissible. (b) Hose mask without blower. The wearer provides motivating force to pull air through the hose. The hose inlet is anchored and fitted with a funnel or like object covered with a fine mesh screen to prevent entrance of coarse particulate matter. Up to 75 feet of hose length is permissible. (2) Air-Line Respirator Respirable air is supplied through a small-diameter air-line from a compressor or compressed air cylinders. The airline is attached to the wearer by belt and can be detached rapidly in an emergency. A flow-control valve or orifice is provided to govern the rate of airflow to the wearer. Exhaled air passes to the ambient atmosphere through a valve(a) or opening in the enclosure (facepiece, hood, suit). Up to 250 feet of air-line is permissible.	Half-mask, full facepiece, or mouthpiece respirator equipped with air-purifying units to remove gases, vapors, and particulate matter from the ambient air prior to its inhalation. <i>Some</i> air-purifying respirators are blower-operated and provide respirable air to the facepiece (or hood) under a slight positive pressure. <i>Organic</i> Gas and Vapor-Removing Respirator Packed sorbent beds (cartridge or canister) remove single gases or vapors (for example, chlorine gas), a single class of gases or vapors (for example, organic vapors) or a combination of two or more classes of gases and vapors (for example, acid gases, organic vapors, ammonia, and carbon monoxide) by absorption, adsorption, chemical reaction or catalysis or a combination of these methods. (1) Full Facepiece Respirator (Gas Mask) Equipped with a single large chin canister or harness mounted canister with breathing tube and inhalation and exhalation valves. Canisters come in the "super" size, "industrial" size (regular), and chin style. The service life is approximately proportional to the canister size for a given type of canister. Canisters for protecting against CO have an indicator or timer that shows when the canister shall be changed. Canisters are marked in bold letters with the contaminant against which they protect and are color coded for quick identification according to the American National Standard Identification of Gas Mask Canisters, K13.1-1967 (see Table 5). The maximum concentration in which the canister can be safely used is indicated on the label. <i>25 Powered</i> Particulate-Removing Respirators Filter media in pads, cartridges, or canisters remove dust, fog, fume, mist, smoke or spray particles. Filters are designed to remove a single type of particle (silica dust) or classes of particles (dusts and fumes). Filters may be replaceable or a permanent part of the respirator. Some filters can be used only once; others are reusable and should be cleaned according to the manufacturer's instructions. (1) Full Facepiece Respirator Normally equipped with a high-efficiency filter canister designed to protect against hazardous particulates. Equipped with inhalation and exhalation valves. (2) Half-Mask Respirator Normally equipped with one or two dust, mist or fume filters designed to protect against nuisance and low to moderate toxicity dusts, fumes, and mists, an exhalation valve, and (normally) inhalation valves. A knitted fabric cover is sometimes worn on dust respirators to decrease discomfort. (3) Mouthpiece Respirator Infrequently used as a particulate respirator. (See Mouthpiece Respirator, Gas- and Vapor-Removing, in column 3.)

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Exhaled air passes through a second check valve breathing tube assembly into the canister. The O₂ release rate is governed by the volume of exhaled air. CO₂ is removed by the canister fill.

(2) Open-Circuit SCBA (compressed air, compressed oxygen, liquid air, or liquid oxygen)

(a) Demand type.* Equipped with a demand valve permits oxygen or air flow only during inhalation. Exhaled breath passes to ambient atmosphere through a valve(s) in the facepiece. A bypass system is provided in case of regulator failure except on escape-type units.

(b) Pressure-demand type,† Equipped with full facepiece only. Positive pressure is maintained in the facepiece at all times. The wearer usually has the option of selecting the demand or pressure-demand mode of operation.

Combination Self-Contained and Air-Line Respirators

Normally a demand or pressure-demand type air-line respirator with full or half-mask facepiece, together with a small compressed-air cylinder to provide air if the normal supply fails. Wearer immediately returns to a respirable atmosphere if the normal air supply fails.

Combination Atmosphere-Supplying and Air-Purifying Respirators

These provide the wearer the option of using either of two different modes of operation. They may be an air-line respirator with an air-purifying attachment to provide protection in the event the air supply fails or an air-purifying respirator with a small air cylinder in case the atmosphere unexpectedly exceeds safe conditions for use of an air-purifying respirator.

*Equipped with a demand valve that is activated on initiation of inhalation and permits the flow of breathing atmosphere to the facepiece. On exhalation, pressure in the facepiece becomes positive and the demand valve is deactivated.

†A small positive pressure is maintained at all times in the facepiece by a spring-loaded or balanced regulator and exhalation valve.

(2) Half-Mask Respirator (Chemical-Cartridge Respirator)

Equipped with one or more cartridge and exhalation and inhalation valves.

(3) Mouthpiece Respirator

A compact device designed for quick application when the atmosphere unexpectedly is contaminated with a hazardous material. Normally consists of a housing with a mouthpiece and a single cartridge, a nose clamp, exhalation and inhalation valves, and a neckband.

Combination Gas, Vapor, and Particulate-Removing Respirators

Some canisters and cartridges contain both filters and sorbents to provide protection against contaminants. Some filters are designed to be attached to a sorbent cartridge as a pre-filter (for example, for paint spray operation).

Table 4
Capabilities and Limitations of Respirators

Atmosphere-Supplying Respirators	Air-Purifying Respirators
(See 5.3 for specifications on respirable atmospheres.)	General Limitations: Air-purifying respirators do not protect against oxygen-deficient atmospheres nor against skin irritation by, or sorption through the skin of, airborne contaminants. See 6.3.1. and 6.3.5.1.
Atmosphere-supplying respirators provide protection against oxygen deficiency and most toxic atmospheres. The breathing atmosphere is independent of ambient atmospheric conditions.	The maximum contaminant concentration against which an air purifying respirator will protect is determined by the designed efficiency and capacity of the cartridge, canister, or filter. For gases and vapors and for particles having a TLV of less than 0.1 mg/m ³ , the maximum concentration for which the air purifying unit is designed is specified on the label. Respirators without a blower to maintain a constant positive pressure within the facepiece will not provide the maximum design protection specified unless the facepiece is carefully fitted to the wearer's face to prevent inward leakage. See 7.5. The time period over which protection is provided is dependent on canister, cartridge, or filter type, concentration of contaminant, and the wearer's respiratory rate.
General Limitations: Except for the supplied-air suit, no protection is provided against skin irritation by materials such as Ammonia and HCl, or against sorption of materials such as HCN, tritium, or organic phosphate pesticides through the skin. See 6.3.5.1. Facepieces present special problems to individuals required to wear prescription lenses (see 9.1 and 9.2).	The proper type of canister, cartridge, or filter shall be selected for the particular atmosphere and conditions. Air-purifying respirators generally cause discomfort and objectionable resistance to breathing although these problems are minimized in blower-operated units. Respirator facepieces present special problems to individuals required to wear prescription lenses. (See 9.1 and 9.2.) These devices do have the advantage of being small, light, and simple in operation.
Self-Contained Breathing Apparatus (SCBA)	Hose Mask or Air-line Respirator
The wearer carries his own breathing atmosphere. Use is permissible in atmospheres immediately dangerous to life or health.	The respirable air supply is not limited to the quantity the individual can carry, and the devices are light weight and simple.
Limitations: The period over which the device will provide protection is limited by the amount of air or oxygen in the apparatus, the ambient atmospheric pressure (service life is cut in half by a doubling of the atmospheric pressure), and work load. A warning device shall be provided to indicate to the wearer when the service life has been reduced to a low level. Some SCBA devices have a short service life (few minutes) and are suitable only for escape (self-rescue) from an irrespirable atmosphere. Chief limitations of SCBA devices are their weight or bulk or both, limited service life, and the training required for their maintenance and safe use.	Limitations: The wearer is restricted in movement by the hose or air-line and must return to a respirable atmosphere by retracing his route of entry. The hose or air-line is subject to being severed or pinched off.
(1) Closed-circuit SCBA	(1) Hose Mask
The closed circuit operation conserves oxygen and permits longer service life.	(a) Hose mask with blower. If the blower fails, the unit still provides protection, although a negative pressure exists in the facepiece during inhalation. Use is permissible in atmospheres immediately dangerous to life or health.
	(b) Hose mask without blower. Limited to use in atmospheres from which the wearer can escape unharmed without aid of the respirator.
	(2) Air-Line Respirators (Continuous-Flow, Demand and Pressure-Demand Types)
	The demand type produces a negative pressure in the facepiece on inhalation whereas continuous flow and pressure-demand types maintain
	Gas- and Vapor-Removing Respirators
	Additional Limitations: No protection is provided against particulate contaminants, unless specified on canister or cartridge label. A rise in canister or cartridge temperature indicates that a gas or vapor is being removed from the inspired air. This is not a reliable indicator of canister performance. An uncomfortably high temperature indicates a high concentration of gas or vapor and requires an immediate return to fresh air.
	(1) Full Facepiece Respirator (Gas Mask)
	Should avoid use in atmospheres immediately dangerous to life or health if the contaminant(s) lacks sufficient warning properties (that is, odor or irritation).
	Particulate-Removing Respirators
	Additional Limitations: Protect against non-volatile particles only. No protection against gases and vapors.
	The filter shall be replaced or cleaned when breathing becomes difficult due to plugging by retained particles.
	These respirators shall not be used during shot and sand blasting operations. Abrasive-blasting respirators shall be used.
	(1) Full Facepiece Respirator
	Should avoid use in atmospheres immediately dangerous to life or health if the contaminant(s) lacks sufficient warning properties (that is, odor or irritation).

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(2) Open-circuit SCBA—demand and pressure-demand

The demand type produces a negative pressure in the facepiece on inhalation whereas the pressure-demand type maintains a positive pressure in the facepiece and is less apt to permit inward leakage of contaminants.

a positive pressure in the facepiece at all times and are less apt to permit inward leakage of contaminants.

Limitations: Air-line respirators are limited to use in atmospheres not immediately dangerous to life or health except under conditions specified in 6.3.2 and 7.3. Air-line respirators provide no protection if the air supply fails.

(3) Supplied-Air Suit

These suits protect against atmospheres that affect the skin or mucous membranes or that may be absorbed through the unbroken skin.

Limitations: Some contaminants, such as tritium, may penetrate the suit material and limit its effectiveness. Other contaminants, such as fluorine, may react chemically with the suit material and damage it. See 6.3.5.1.

These suits are limited in use to atmospheres not immediately dangerous to life or health except under the conditions specified in 6.3.2 and 7.3.

Combination Self-Contained and Air-Line Respirators

The equipping of an air-line respirator with a small cylinder of compressed air to provide an emergency air supply qualifies the respirator for use in immediately dangerous atmospheres. See 6.3.2.

Combination Atmosphere-Supplying and Air-Purifying Respirators

The advantages and disadvantages, expressed above, of the mode of operation being used will govern. The mode with the greater limitations (air-purifying mode) will mainly determine the overall capabilities and limitations of the respirator since the wearer may for some reason fail to change the mode of operation even though conditions would require such change.

(2) Half-Mask Respirator (Chemical-Cartridge Respirator)

Shall not use in atmospheres immediately dangerous to life or health and should be limited to low concentrations of gases and vapors. A fabric covering shall not be worn on the facepiece since it will permit gases and vapors to pass.

No protection is provided to the eyes.

(3) Mouthpiece Respirator (Chemical Cartridge)

Shall not be used in atmospheres immediately dangerous to life or health. Mouth breathing prevents detection of contaminants by odor. The nose clip shall be securely in place to prevent nasal breathing.

No protection is provided to the eyes.

(4) Self-Rescue Mouthpiece Respirator

Designed for self-rescue from immediately dangerous atmospheres of gases and vapors. Mouth breathing prevents detection of contaminants by odor. The nose clip shall be securely in place to prevent nasal breathing.

No protection is provided to the eyes.

Combination Particulate and Vapor- and Gas-Removing Respirators

The advantages and disadvantages of the component parts of the combination respirator as described above will apply.

(2) Half-Mask Respirator

Shall not be used in atmospheres immediately dangerous to life or health. A fabric covering on the facepiece is permissible only in atmospheres of coarse dusts and mists of low toxicity.

No protection is provided to the eyes.

(3) Mouthpiece Respirator (Filter)

Shall not be used in atmospheres immediately dangerous to life or health. Mouth breathing prevents detection of contaminants by odor. The nose clip shall be securely in place to prevent nasal breathing.

No protection is provided to the eyes from irritating aerosols.

(4) Self-Rescue Mouthpiece Respirator (Filter)

Designed for self-rescue from atmospheres having immediately dangerous concentrations of toxic particles. Mouth breathing prevents detection of contaminants by odor. The nose clip shall be securely in place to prevent nasal breathing.

No protection is provided to the eyes from irritating aerosols.

be given full consideration. In oxygen-deficient atmospheres with no toxic materials, inward leakage is normally not a problem unless the leakage exceeds a few percent. ~~It is essential that, in highly toxic atmospheres, inward leakage, if any, be minute. See 6.3.2.1 and 7.3 for use of respirators in immediately dangerous atmospheres.~~

6.3.2.1 *Respirators Recommended for Immediately Dangerous Atmospheres.* The U. S. Bureau of Mines and responsible industrial hygiene and safety organizations recommend the following respirators, listed in decreasing order

with regard to the protection they offer the wearer, for use in atmospheres immediately dangerous to life or health. These atmospheres include those which are oxygen deficient or where high concentrations of gases or vapors exist:

(1) pressure-demand open-circuit or pressure-type closed-circuit self-contained breathing apparatus

(2) combination pressure-demand air-line respirator with auxiliary self-contained air supply

(3) combination constant-flow air-line respirator with auxiliary self-contained air supply

Table 5

Color Code for Gas-Mask Canisters (ANSI K13.1-1967)

Atmospheric Contaminants to be Protected Against	Colors Assigned*
Acid gases	White
Hydrocyanic acid gas	White with $\frac{1}{2}$ -inch green stripe completely around the canister near the bottom
Chlorine gas	White with $\frac{1}{2}$ -inch yellow stripe completely around the canister near the bottom
Organic vapors	Black
Ammonia gas	Green
Acid gases and ammonia gas	Green with $\frac{1}{2}$ -inch white stripe completely around the canister near the bottom
Carbon monoxide	Blue
Acid gases and organic vapors	Yellow
Hydrocyanic acid gas and chloropicrin vapor	Yellow with $\frac{1}{2}$ -inch blue stripe completely around the canister near the bottom
Acid gases, organic vapors, and ammonia gases	Brown
Radioactive materials, excepting tritium and noble gases	Purple (Magenta)
Particulates (dusts, fumes, mists, fogs, or smokes) in combination with any of the above gases or vapors	Canister color for contaminant, as designated above, with $\frac{1}{2}$ -inch gray stripe completely around the canister near the top
All of the above atmospheric contaminants	Red with $\frac{1}{2}$ -inch gray stripe completely around the canister near the top

*Gray shall not be assigned as the main color for a canister designed to remove acids or vapors.

NOTE: Orange shall be used as a complete body, or stripe color to represent gases not included in this table. The user will need to refer to the canister label to determine the degree of protection the canister will afford.

(4) demand-flow open-circuit or closed-circuit self-contained breathing apparatus (where there may be a negative pressure in the breathing system at any time)

(5) combination demand-flow air-line respirator with auxiliary self-contained air supply

(6) hose mask with blower

When self-contained breathing apparatus or hose masks with blowers are used in atmospheres immediately dangerous to life or health, standby men must be present with suitable rescue equipment.

6.3.2.2 Other Respirators Which May Be Used under Certain Conditions in Atmospheres Immediately Dangerous to Life or Health. ~~Air-line respirators are not approved or recommended for use in immediately dangerous atmospheres because no respiratory protection is provided if the air supply fails.~~ However, if

routine protection or operational designs preclude use of the recommended types of respirators which workers should wear, the following air-line respirators may be considered, provided an adequate flow of respirable air is maintained. These are listed in decreasing order with regard to the protection they provide for the wearer.

(1) pressure-demand air-line respirator with full facepiece

(2) continuous-flow air-line respirator with full facepiece, helmet, hood, or suit

(3) demand-flow air-line respirator with full facepiece

(4) pressure-demand air-line respirator with half-mask facepiece (only for atmospheres that do not cause eye irritation or injury)

(5) continuous-flow air-line respirator with half-mask facepiece (only for atmospheres that do not cause eye irritation or injury)

Table 6
Guide for Selection of Respirators

Hazard	Respirator (See Note 1.)
Oxygen Deficiency	Self-contained breathing apparatus. Hose mask with blower. Combination air-line respirator with auxiliary self-contained air supply or an air-storage receiver with alarm.
Gas and Vapor Contaminants Immediately dangerous to life or health. (See Note 2.)	Self-contained breathing apparatus. Hose mask with blower. Air-purifying, full facepiece respirator with chemical canister (gas mask). Self-rescue mouthpiece respirator (for escape only). Combination air-line respirator with auxiliary self-contained air supply or an air-storage receiver with alarm.
Not immediately dangerous to life or health.	Air-line respirator. Hose mask without blower. Air-purifying, half-mask or mouthpiece respirator with chemical cartridge.
Particulate Contaminants Immediately dangerous to life or health. (See Note 2.)	Self-contained breathing apparatus. Hose mask with blower. Air-purifying, full facepiece respirator with appropriate filter. Self-rescue mouthpiece respirator (for escape only). Combination air-line respirator with auxiliary self-contained air supply or an air-storage receiver with alarm.
Not immediately dangerous to life or health.	Air-purifying, half-mask or mouthpiece respirator with filter pad or cartridge. Air-line respirator. Air-line abrasive-blasting respirator. Hose mask without blower.
Combination gas, vapor, and particulate contaminants Immediately dangerous to life or health. (See Note 2.)	Self-contained breathing apparatus. Hose mask with blower. Air-purifying, full facepiece respirator with chemical canister and appropriate filter (gas mask with filter). Self-rescue mouthpiece respirator (for escape only). Combination air-line respirator with auxiliary self-contained air supply or an air-storage receiver with alarm.
Not immediately dangerous to life or health.	Air-line respirator. Hose mask without blower. Air-purifying, half-mask or mouthpiece respirator with chemical cartridge and appropriate filter.

NOTE 1: For details on descriptions, capabilities, and limitations of respirators, refer to Tables 3 and 4.

NOTE 2: For details on use of respirators in hazardous atmospheres, see 6.3.2 and 7.3.

(6) demand-flow air-line respirator with half-mask facepiece (only for atmospheres that do not cause eye irritation or injury)

Pressure-demand or continuous-flow air-line respirators with full facepiece provide the wearer with a degree of respiratory protection equal to that afforded by a positive pressure self-contained breathing apparatus as long as an adequate flow of respirable air is maintained. Also, a demand-flow air-line respirator with full facepiece would be equivalent to a demand-flow open-circuit or closed-circuit self-contained breathing apparatus as long as an adequate supply of respirable air is maintained.

Persons using air-line respirators in atmospheres immediately hazardous to life or health shall be equipped with safety harnesses and safety lines for lifting or removing persons from hazardous atmospheres or other and equivalent provisions for the rescue of persons from hazardous atmospheres shall be used. A standby man or men with suitable self-contained breathing apparatus shall be at the nearest fresh air base for emergency rescue.

Before a person is permitted to wear an air-line respirator in a hazardous atmosphere, an industrial hygiene, health physics, or safety engineering department representative or a qualified industrial hygienist, health physicist, or safety engineer shall be responsible for compliance with the following:

(1) Air-line hose from a compressor or cylinder air supply shall be protected from damage, including cutting, kinking, crushing, or burning. In some cases an armored hose shall be used. Hose couplings shall be protected against disconnection. Trailing air-line hose shall be arranged to minimize tripping and to permit ready escape.

(2) The cylinder containing the air supply for an air-line respirator shall be tested for oxygen concentration and carbon monoxide content and shall be respirable. All air shall meet the minimum specification for Type I, Grade D gaseous air of the Compressed Gas Association *Commodity Specification for Air*, G-7.1-1966. The air supply in the cylinder shall be adequate for completion of the work and escape. *Oxygen must never be used with air-line respirators.*

(3) The compressor for supplying air shall be equipped with necessary safety and standby devices. A breathing air-type compressor shall be used. An air-storage receiver shall also be

provided to furnish the wearer with an adequate supply of escape air if the compressor fails to operate. A compressor shutoff alarm and necessary aerosol and vapor and gas filters shall also be incorporated into the system.

If an oil-lubricated compressor is used, it shall have a high-temperature or carbon monoxide alarm, or both. If only a high-temperature alarm is used, the air from the compressor shall be frequently tested for carbon monoxide to insure that it meets the specifications in 6.3.2.2 (2).

(4) The wearer shall be properly trained in the use of the air-line respirator and shall be well-informed of the hazard. A standard operating procedure shall be prepared for each situation for which air-line respirators are employed in atmospheres immediately hazardous to life or health, and air-line respirator users shall be thoroughly familiar with this procedure.

(5) Continuous-flow air-line respirators are designed for maximum comfort with a minimum airflow that will adequately protect the wearer in a non-hazardous atmosphere. However, they are capable of providing adequate airflow to protect the wearer in a hazardous atmosphere. This adequate airflow is obtained when the airflow control valve is fully open.

The recommended minimum airflows for use of air-line respirators in hazardous atmospheres are five cubic feet per minute to tight fitting facepieces and seven cubic feet per minute to loose fitting hoods or helmets. Persons wearing supplied-air suits shall follow the manufacturer's instructions concerning minimum airflow.

For further information on furnishing compressed air to air-line respirators, refer to Compressed Gas Association Pamphlet G-7-1968. See 7.3 concerning safe procedures during use of respirators in atmospheres immediately dangerous to life or health.

6.3.3 Not Immediately Dangerous Atmospheres. If immediately dangerous atmospheres are not present or will not occur, then the consequences of respirator failure are lessened and emphasis can be placed on other factors such as long term protection, convenience, cost, comfort, and wearer acceptance. These factors should be weighed one against another since they are not always compatible. However, long term protection should be given priority over all other factors.

Long term protection is determined primarily by the amount of inward leakage of atmospheric contaminants during normal usage of the respirator. The various types of respirators are grouped below according to the increasing amount of inward leakage one might expect during their routine use.

Group 1

Supplied-air suit

Pressure-demand full facepiece open-circuit and air-line devices

Pressure-type full facepiece closed-circuit self-contained breathing apparatus

Continuous-flow full facepiece air-line respirator

Air-line respirator with loose-fitting hood gathered around the waist

Hose-mask with blower and full facepiece mask

Group 2

Demand-type full facepiece open-circuit self-contained breathing apparatus

Demand-type full facepiece air-line respirator

Pressure-demand half-mask air-line respirator

Group 3

Continuous-flow half-mask air-line respirator

Demand-type half-mask air-line respirator

Air-line respirator with loose-fitting hood gathered around the neck

Group 4

Air-purifying respirator with blower and with full facepiece or hood gathered around the waist

Group 5

Air-purifying respirator with blower and with half-mask facepiece or hood gathered around the neck

Group 6

Hose mask without blower

Air-purifying full facepiece respirator without blower

Group 7

Air-purifying half-mask respirator without blower

Mouthpiece respirator

The negative pressure produced in the facepiece of many respirators (some in Groups 2 and 3 and all in Groups 6 and 7) during inhalation will cause inward leakage of ambient air if leaks exist. The amount of inward leakage expected for various types of respirators is vaguely understood and is related to the facepiece-to-face seal and leakage of various components including air-purifying units. For Group 1, inward leakage will normally be infinitesimal or

nonexistent. For Groups 2, 3, 4, and 5, inward leakage will normally be minute. In Group 6, inward leakage with a good facepiece-to-face seal and with ideal wearing conditions may be as low as 0.1 percent. In practice, however, this low level leakage is usually not attained due to poor facepiece-to-face fit and adverse wearing conditions such as face movements and beard growth. For Group 7, inward leakage with good facepiece-to-face fit and ideal wearing conditions may be as low as 1 percent. This leakage level, however, is seldom attained for reasons similar to those cited for devices in Group 6. It is, therefore, important (particularly for devices in Groups 6 and 7) that due consideration be given to potential inward leakage in selecting devices.

Experience has demonstrated that not all persons can obtain a satisfactory facepiece-to-face seal with a single full facepiece or half-mask air-purifying respirator. Therefore, to provide an adequate facepiece-to-face seal on a variety of facial features, it may be necessary that two or more models of full facepiece or half-mask respirators be available. When an individual can be fitted with two or more respirators, he should be permitted to select the most comfortable device. See 7.5 for a discussion of face fit tests and procedures.

6.3.4 Monitoring of Air Contaminants. Evaluation of contaminant concentration to which a person wearing a respirator may be exposed is an integral part of an effective respirator program. Air sampling data are important in the selection of the proper respirator and should include: 1) identification of the contaminant; 2) nature of the hazard; and 3) concentration at the breathing zone. The data are also helpful in estimating the possible levels of exposure that may have occurred during use of respirators.

In an air monitoring program, sampling should be carried out over at least one cycle of operation and, preferably, over several cycles when production activity varies. Normally, samples should be collected at the worker's breathing zone. However, where necessary, general air samples should be collected in the vicinity of the operation. The sampling period will be determined by the sensitivity of the analytical method and the acceptable contaminant concentration.

It is important that representative samples be obtained. The number of samples to be taken depends on the variation in contaminant

generation rate during the operation. Sampling data should permit estimation of the worker's time weighted exposure. The peak contaminant concentration should also be estimated to assure that the respirator selected will provide adequate protection against high transient air concentrations.

Breathing zone sampling is important since significant variations in concentrations are noted between general air and the worker's breathing zone. Use of personal or lapel air samplers is encouraged since they have been shown to more closely identify the true exposure.

Although it is recognized that in emergency situations air sampling cannot be carried out as outlined above, every reasonable effort shall be made to evaluate conditions of exposure and to provide appropriate respiratory protection. Where a high hazard potential exists, a conservative estimate should be made.

6.3.5 Unusual Hazards. Unusual factors can add new dimensions to a hazardous situation and should be anticipated in selecting respirators. Some examples are provided here.

6.3.5.1 Absorption through or Irritation of the Skin. Some airborne contaminants are extremely irritating to the skin (for example, ammonia and hydrochloric acid) while others are capable of being absorbed through the skin and into the blood stream with serious, possibly fatal, results. Hydrocyanic acid gas and many of the organic phosphate pesticides, such as parathion, malathion, and tetraethyl-pyrophosphate (TEPP), will penetrate the unbroken skin. A facepiece or hood respirator will not afford complete protection against these contaminants. If the concentration is high, or if exposure is prolonged, a full body-covering suit of impermeable material shall be worn with respiratory protection. A facepiece may not be required if the suit is leakproof and adequately ventilated.

6.3.5.2 Radiation of Skin and Whole Body. The respirator may not protect the skin or whole body against radiation from airborne concentrations of certain radionuclides including noble gas radionuclides and other relatively biologically inert gases.

6.4 Extent and Location of Hazard. The extent of the hazard in space and time and its physical location shall be considered in respirator selection. They include the length of time protection will be needed, entry and exit times, accessibility of a fresh air supply, and the ability

to use air lines or move about freely while wearing the respirator.

The location of the contaminated area in respect to a possible source of respirable air requires special consideration. In using a hose mask, air-line respirator, or abrasive-blasting respirator, the distance that the wearer can go into a contaminated atmosphere is limited by the length of hose connected to the source of respirable air. Furthermore, the presence of the hose requires that he enter and leave the area by the same route unless the device is equipped with an auxiliary air cylinder, chemical canister or cartridge, or particulate filter appropriate for use in withdrawal. While wearing a self-contained breathing apparatus or a gas mask, a person may leave the contaminated area by any exit, but he should make certain that the device will afford protection until he reaches respirable air, taking into account possible delays.

6.5 Work Requirements and Conditions

6.5.1 Work Time. Work time usually determines the length of time for which respiratory protection is needed, including the time necessary to enter and leave a contaminated area. A self-contained breathing apparatus, gas mask, or chemical-cartridge respirator provide respiratory protection for relatively short periods, whereas the hose mask with blower, air-line respirator, and abrasive-blasting respirator provide protection for as long as the facepiece is supplied with adequate respirable air. Particulate-filter respirators can provide protection for long periods, without need for filter replacement, only if the atmospheric particulate loading is low. Therefore, for protracted periods of use, the hose mask with blower and air-line respirators offer definite advantages. They also cause less discomfort than air-purifying respirators.

Some respirators have a means for indicating the remaining service life. Some type of warning is available for all self-contained breathing apparatus and some gas masks. This may be a pressure gage, timer, audible or physical alarm, or window indicator in the canister. The user should understand the operation and limitations of each type of warning device. Most other gas masks and chemical-cartridge respirators have no indicator of remaining service life. Canisters and cartridges should be changed according to the manufacturer's directions.

6.5.2 Activity of Wearer. The work area to be covered, work rate, and mobility required of

the wearer in carrying out his work should be considered in respirator selection.

Air-purifying respirators present minimal interference with the wearer's movement. Supplied-air respirators with trailing hoses severely restrict the area the wearer can cover and present a potential hazard where the trailing hose can come in contact with machinery. Self-contained breathing apparatus present a size and weight penalty which may restrict climbing and movement in tight places.

The wearer's work rate determines his respiratory minute volume, maximum inspiratory flow rate, and inhalation and exhalation breathing resistance. The respiratory minute volume is of great significance in self-contained and air-line respirators operated from cylinders since it determines their operating life. Useful life under moderate work conditions may be one-third that under rest conditions.

Peak airflow rate is important in the use of constant-flow air-line equipment. The air-supply rate should always be greater than the peak inspiratory flow rate to maintain the respiratory enclosure under positive pressure.

High breathing resistance of air-purifying respirators under conditions of heavy work can result in distressed breathing.

6.5.3 Vision. All facepieces will restrict, to some degree, the wearer's vision. This may increase accident potential. Other problems include wearing of prescription glasses and fogging of the respirator lens (see 9.1, 9.2, and 9.3).

6.5.4 Communications. Effective speech communication may be required in jobs for which the respirator is being selected. Section 9.5 provides information in this subject.

6.5.5 Temperature Extremes. The ability to cope with stress caused by temperature extremes is especially important in emergency situations when only immediately available respirators can be used. See 9.3 and 9.4 for further details on use of respirators in temperature extremes.

6.5.6 Eye Protection. Where required, full-facepiece respirator eyepieces and eye protection worn with half-mask facepieces shall meet the pertinent requirements of American National Standard Practice for Occupational and Educational Eye and Face Protection, Z87.1-1968.

6.6 Employee Acceptance and Face Fit. These factors are of prime importance in respirator

selection. The wearer's acceptance of a particular respirator depends on the lack of facepiece discomfort, interference with vision, weight of the device, breathing resistance, and individual physical condition and psychological factors. The ability to form a good facepiece-to-face seal depends on respirator design and facial features, and is usually the most important factor in obtaining proper protection with an air-purifying respirator, particularly of the half-mask type. See 7.5 for a discussion of face-fit tests and procedures.

7. Use of Respirators

7.1 Operating Procedures. Standard procedures shall be developed for respirator use. These should include all information and guidance necessary for their proper selection, use, and care. Possible emergency and routine uses of respirators should be anticipated and planned for.

7.2 Issuance of Respirators. The correct respirator shall be specified for each job. The respirator type is usually specified in the work procedures by a qualified individual supervising the respiratory protective program. The individual issuing them shall be adequately instructed to insure that the correct respirator is issued. Each respirator permanently assigned to an individual should be durably marked to indicate to whom it was assigned. This mark shall not affect the respirator performance in any way. The date of issuance should be recorded.

7.3 Use in Dangerous Atmospheres. Written procedures shall be prepared covering safe use of respirators in dangerous atmospheres that might be encountered in normal operations or in emergencies. Personnel shall be familiar with these procedures and the available respirators.

In areas where the wearer, with failure of the respirator, could be overcome by a toxic or oxygen-deficient atmosphere, at least one additional man shall be present. Communications (visual, voice, or signal line) shall be maintained between both or all individuals present. Planning shall be such that one individual will be unaffected by any likely incident and have the proper rescue equipment to be able to assist the other(s) in case of emergency. See 6.3.1 and 6.3.2 for guidance on selection of respirators for use in dangerous atmospheres.

7.4 Training and Education in Proper Use. For safe use of any respirator, it is essential that the user be properly instructed in its selection, use, and maintenance. Both supervisors and workers shall be so instructed by competent persons.

Minimum training shall include the following:

(1) Instruction in the nature of the hazard, whether acute, chronic, or both, and an honest appraisal of what may happen if the respirator is not used.

(2) Explanation of why more positive control is not immediately feasible. This shall include recognition that every reasonable effort is being made to reduce or eliminate the need for respirators.

(3) A discussion of why this is the proper type of respirator for the particular purpose.

(4) A discussion of the respirator's capabilities and limitations.

(5) Instruction and training in actual use of the respirator (especially a respirator for emergency use) and close and frequent supervision to assure that it continues to be properly used.

(6) Classroom and field training to recognize and cope with emergency situations.

(7) Other special training as needed for special use.

Training shall provide the men an opportunity to handle the respirator, have it fitted properly, test its facepiece-to-face seal, wear it in normal air for a long familiarity period, and, finally, to wear it in a test atmosphere.

7.5 Facepiece Fit Tests and Procedures. Every respirator wearer shall receive fitting instructions including demonstrations and practice in how the respirator should be worn, how to adjust it, and how to determine if it fits properly. Respirators shall not be worn when conditions prevent a good face seal. Such conditions may be a growth of beard, sideburns, a skull cap that projects under the facepiece, or temple pieces on glasses. Also, the absence of one or both dentures can seriously affect the fit of a facepiece. The worker's diligence in observing these factors shall be evaluated by periodic checks.

To assure proper protection, the facepiece fit shall be checked by the wearer each time he puts on the respirator. This may be done by

following the manufacturer's facepiece-fitting instructions such as these two simple field tests:

(1) **Positive Pressure Test.** Close the exhalation valve and exhale gently into the facepiece. The face fit is considered satisfactory if a slight positive pressure can be built up inside the facepiece without any evidence of outward leakage of air at the seal. For most respirators, this method of leak testing requires that the wearer first remove the exhalation valve cover and then carefully replace it after the test.

(2) **Negative Pressure Test.** Close off the inlet opening of the canister or cartridge(s) by covering with the palm of the hand(s) or by replacing the seal(s), inhale gently so that the facepiece collapses slightly, and hold the breath for ten seconds. If the facepiece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is probably satisfactory.

Potential users of respirators should also be required to test their facepiece fit by wearing the respirator under realistic test conditions. A concentration of 100 parts per million isoamyl acetate vapor (obtained by vaporizing 17.3 milliliters of isoamyl acetate for each 1,000 cubic feet of room volume) may be prepared in a special chamber, a small plastic enclosure, or in a vacant room. If the person wearing the respirator can enter and remain in this test atmosphere without detecting the odor of isoamyl acetate, he has a good fit. If he detects the odor, he should retreat to fresh air, readjust the facepiece, and repeat the test. If leakage is still noted, it can be concluded that this particular respirator will not protect the wearer. The wearer should not continue to tighten the headband straps until they are uncomfortably tight, simply to achieve a gas-tight face fit. If fitted too tightly, the wearer will not wear the respirator or will wear it fitting comfortably loose and will not have a gas-tight seal.

Particulate-filter respirators can frequently be adapted for use with chemical cartridges and may also be tested for face fit in isoamyl acetate.

To check the fit of a respirator equipped with a high-efficiency particulate filter, an irritant smoke tube (glass tube 12 centimeters long by 1 centimeter diameter, filled with stannic chloride-impregnated pumice) produces a very irritating smoke when air is blown through it. The smoke is directed at the facepiece seal and leakage is indicated by irritation of the throat and lungs. (When testing half-mask facepieces,

do not direct the smoke into the eyes and instruct the wearer to keep his eyes closed during the test.) Freshly produced smoke particles from this tube range from less than 0.1 to 3 microns in diameter. The glass tube is scored at each end for easy breaking. A squeeze bulb with a short rubber tube aspirates air through the tube; visible smoke is immediately formed by contact with moisture in the air. The irritant is hydrochloric acid absorbed on the particulate. A similar smoke is produced with a sulfur trioxide or titanium tetrachloride tube.

Several methods of determining facepiece fit are described in detail in the *Respiratory Protective Devices Manual*, published by the American Industrial Hygiene Association and the American Conference of Governmental Industrial Hygienists in 1963.

8. Maintenance and Care of Respirators

8.1 General. A program for maintenance and care of respirators shall be adjusted to the type of plant, working conditions, and hazards involved, and shall include the following basic services:

- (1) inspection for defects (including a leak check)
- (2) cleaning and disinfecting
- (3) repair
- (4) storage

Equipment shall be properly maintained to retain its original effectiveness.

8.2 Inspection. All respirators shall be inspected routinely before and after each use. A respirator that is not routinely used but is kept ready for emergency use shall be inspected after each use and at least monthly to assure that it is in satisfactory working condition.

Self-contained breathing apparatus shall be inspected monthly. Air and oxygen cylinders shall be fully charged according to the manufacturer's instructions. It shall be determined that the regulator and warning devices function properly.

Respirator inspection shall include a check of the tightness of connections and the condition of the facepiece, headbands, valves, connecting tube, and canisters. Rubber or elastomer parts shall be inspected for pliability and signs of deterioration. Stretching and manipulating rubber

or elastomer parts with a massaging action will keep them pliable and flexible and prevent them from taking a set during storage.

A record shall be kept of inspection dates and findings for respirators maintained for emergency use.

8.3 Cleaning and Disinfection. Routinely used respirators shall be collected, cleaned, and disinfected as frequently as necessary to insure that proper protection is provided for the wearer. Each worker should be briefed on the cleaning procedure and be assured that he will always receive a clean and disinfected respirator. Such assurances are of greatest significance when respirators are not individually assigned to workers. Respirators maintained for emergency use shall be cleaned and disinfected after each use.

The following procedure is recommended for cleaning and disinfecting respirators:

- (1) Remove any filters, cartridges, or canisters.
- (2) Wash facepiece and breathing tube in cleaner-disinfectant or detergent solution (see following paragraphs). Use a hand brush to facilitate removal of dirt.
- (3) Rinse completely in clean, warm water.
- (4) Air dry in a clean area.
- (5) Clean other respirator parts as recommended by manufacturer.
- (6) Inspect valves, headstraps, and other parts; replace with new parts if defective.
- (7) Insert new filters, cartridges, or canisters; make sure seal is tight.
- (8) Place in plastic bag or container for storage.

Cleaner-disinfectant solutions are available that effectively clean the respirator and contain a bactericidal agent. The bactericidal agent is generally a quaternary ammonium compound. The respirator may be immersed in the solution, rinsed in clean, warm water, and air dried.

Alternatively, respirators may be washed in a liquid detergent solution, then immersed in: 1) a hypochlorite solution (50 parts per million of chlorine) for 2 minutes; 2) an aqueous iodine solution (50 parts per million of iodine) for 2 minutes; or 3) a quaternary ammonium solution (200 parts per million of quaternary ammonium compounds in water with less than 500 parts per million total hardness).

Different concentrations of quaternary ammonium salts are required to achieve a disinfecting solution with waters of varying hardness. Also, dermatitis may occur if the quaternary ammonium compounds are not completely rinsed from the respirator. The hypochlorite and iodine solutions are not stable; they age rubber parts, and are corrosive to metallic parts. Therefore, immersion times should not be extended and the disinfectants shall be thoroughly rinsed from the respirator parts.

Strong cleaning and disinfecting agents can damage respirator parts. Temperatures above 185 degrees Fahrenheit and vigorous mechanical agitation should not be used. Solvents which affect elastomer or rubber parts should be used with caution.

Respirators may be contaminated with toxic materials (that is, organic phosphate pesticides and radionuclides). If the contamination is light, normal cleaning procedures should provide satisfactory decontamination; if heavy, a separate decontamination step may be required before cleaning.

For complete decontamination against phosphate pesticides, the respirator should be washed with alkaline soap and rinsed with 50 percent alcohol (ethyl or isopropyl).

Respirators used to protect against radioactive contaminants should be decontaminated to levels not exceeding 100 disintegrations per minute per 100 square centimeters fixed alpha and 0.2 millirad per hour of beta-gamma above background at contact. There should be no detectable removable activity using standard swipe techniques.

8.4 Repair. Replacement or repairs shall be done only by experienced persons with parts designed for the respirator. No attempt shall be made to replace components or to make adjustment or repairs beyond the manufacturer's recommendations. Reducing or admission valves or regulators shall be returned to the manufacturer or to a trained technician for adjustment or repair.

8.5 Storage. After inspection, cleaning, and necessary repair, respirators shall be stored to protect against dust, sunlight, heat, extreme cold, excessive moisture or damaging chemicals. Respirators placed at stations and work areas for emergency use should be stored in compartments built for the purpose, be quickly accessible at all times, and be clearly marked. Routinely

used respirators, such as dust respirators, may be placed in plastic bags. Respirators should not be stored in such places as lockers or tool boxes unless they are in carrying cases or cartons.

Respirators should be packed or stored so that the facepiece and exhalation valve will rest in a normal position and function will not be impaired by the elastomer setting in an abnormal position.

Instructions for proper storage of emergency respirators, such as gas masks and self-contained breathing apparatus, are found in "use and care" instructions usually mounted inside the carrying case lid.

9. Special Problems

9.1 Corrective Lens with Full Facepiece. Providing respiratory protection for individuals wearing corrective glasses is a serious problem. A proper seal cannot be established if the temple bars of eye glasses extend through the sealing edge of the full facepiece. As a temporary measure, glasses with short temple bars or without temple bars may be taped to the wearer's head. Wearing of contact lenses in contaminated atmospheres with a respirator shall not be allowed.

Systems have been developed for mounting corrective lenses inside full facepieces. When a workman must wear corrective lenses as part of the facepiece, the facepiece and lenses shall be fitted by qualified individuals to provide good vision, comfort, and a gas-tight seal.

9.2 Eyewear with Half-Mask Facepiece. If corrective spectacles or goggles are required, they shall be worn so as not to affect the fit of the facepiece. Proper selection of equipment will minimize or avoid this problem.

9.3 Respirator Use in Low Temperatures. Major problems in the use of full facepieces at low temperatures are poor visibility and freezing of exhalation valves. All full facepieces are designed so that the incoming fresh air sweeps over the inside of the lens to reduce fogging. Otherwise, it would be impossible to wear a full facepiece in ordinary room temperatures without severe fogging. Antifog compounds can be used to coat the inside of the lens to prevent fogging at room temperatures and down to temperatures approaching 32 degrees Fahrenheit. However, below zero degrees Fahrenheit, antifog compounds will not prevent severe fogging.

Full facepieces are available with nose cups that direct moist exhaled air through the exhalation valve. A properly fitted nose cup should provide satisfactory or adequate visibility at temperatures down to -30 degrees Fahrenheit.

At very low temperatures, the exhalation valve may collect moisture and freeze open, allowing the wearer to breathe contaminated air, or freeze closed, preventing normal exhalation. The Bureau of Mines has published two pamphlets on this subject: *Performance of Open-Circuit Self-Contained Breathing Apparatus at -25° F*, R.I. 7077 (1966), and *Low-Temperature Performance of Compressed-Oxygen Closed-Circuit Breathing Apparatus*, R.I. 7192 (1968). Dry respirable air shall be used with self-contained breathing apparatus or air-line respirators at low temperatures. The dewpoint of the breathing gas shall be appropriate to the ambient temperature.

High-pressure connections on self-contained breathing apparatus may leak because of metal contraction at low temperatures. The connections should not be overtightened since they may break when the temperature returns to normal.

9.4 Respirator Use in High Temperatures. A man working in areas of high ambient or radiant temperature is under stress. Any additional stress resulting from use of respirators should, therefore, be minimized. This can be done by selecting and using respirators having minimum weight and breathing resistance. Supplied-air respirators and hoods and suits having an adequate supply of cool breathing air are recommended. Further information on use of respirators in high temperatures may be found in *Breathing Apparatus for the Fire Service*, published by the National Fire Protection Association in 1966.

9.5 Communications. Although conventional respirators distort the human voice to some extent, the respirator exhalation valve usually provides a pathway for some speech transmission over short distances in relatively quiet areas. Talking can induce facepiece or component leakage and therefore should be limited while wearing a respirator, especially those with half-mask facepieces.

Mechanical speech transmission devices called speaking diaphragms are available as an integral part of some respirators. These consist of a resonant cavity and diaphragm which amplify

sound in the frequency range most important to speech intelligibility. The diaphragm acts as a barrier to the ambient atmosphere. It should be carefully handled and protected by a cover to prevent puncture.

Various methods of electronically transmitting speech from the respirator are available. These utilize a microphone connected to a telephone or radio transmitter. Usually the microphone is mounted in the facepiece, while the amplifier, power pack, and loudspeaker or transmitter are attached to the exterior of the mask, carried on the body, or are remotely located.

Respirators with electric or electronic speech transmission devices having an integral or body-attached battery power supply should be used with caution in explosive atmospheres. Sealed power sources should be checked for integrity of seals. Connecting cables from microphones inside the facepiece shall have gas-tight seals where they emerge from the facepiece. When the loudspeaker diaphragm is part of the barrier between the respirator wearer and the ambient atmosphere, it shall be frequently inspected for leakage and should be adequately protected from puncture or rupture. The assembly of an electronic or electrical speech transmission device into a respirator shall be avoided if it results in a center of gravity and moment of inertia such that the mask may be dislodged from the face during wearer activity in a toxic environment. Removal of speech transmission devices may allow contaminant leakage into the facepiece.

9.6 Nonconventional Respirators. Special respirator designs, such as "neck respirators" for persons having a tracheotomy, may present problems not commonly encountered with conventional respirators. Therefore, the manufacturer should be consulted for special guidance or precautions.

10. Evaluation of Respirator Program Effectiveness

10.1 General. Feedback on how a respirator program is functioning is necessary if management is to maintain effective respiratory protection. Program improvements and elimination of deficiencies cannot be effected unless the program is monitored and evaluated on a continuing basis. The following techniques are used in evaluating the effectiveness of respirator programs.

10.2 Wearer Acceptance. The effectiveness of a respirator program can be largely determined by the degree of worker acceptance. Numerous factors affect the worker's acceptance of respirators. These include comfort, ability to breathe without objectionable effort, adequate visibility under all conditions, provisions for wearing prescription glasses if necessary, ability to communicate, ability to perform all tasks without undue interference, and confidence in the facepiece fit. Failure to consider these factors is likely to reduce cooperation of the wearers in promoting a satisfactory program. How well these problems have been overcome can be determined by observing wearers during normal activities and by soliciting their comments.

10.3 Examination of Respirators in Use. Respiratory protection is no better than the respirator in use, even though it is worn conscientiously. Frequent random inspections shall be conducted by a qualified individual to assure that respirators are properly selected, used, cleaned, and maintained.

10.4 Evaluation of Protection Afforded. When respirators are worn in toxic atmospheres, the individual should be provided appropriate periodic laboratory tests. These may include urine, blood, or fecal analyses and other techniques to determine the intake and excretion of toxic substances. The findings of these tests, when correlated with other exposure data (especially air sampling data, as described in 6.3.4) for wearers of such equipment, can serve as an indication of the effectiveness of the program. Positive evidence of exposure shall be followed up to determine any relationship to inadequate respiratory protection and need for additional engineering controls.

Nasal or facepiece interior smears, or both, usually will detect any significant penetration of radioactive contaminants into the facepiece.

11. References to Other Codes, Standards and Manuals

11.1 American National Standards Institute. When any of the following American National Standards is superseded by a revision approved by the Standards Institute, the revision shall apply.

11.1.1 American National Standard Identification of Gas Mask Canisters, K13.1-1967

11.1.2 American National Standard Method of Marking Portable Compressed Gas Containers To Identify the Material Contained, Z48.1-1954

11.1.3 American National Standard Practice for Occupational and Educational Eye and Face Protection, Z87.1-1968

11.1.4 American National Standard Safety Guide for Respiratory Protection against Radon Daughters, Z88.1-1969

11.2 Compressed Gas Association

11.2.1 Commodity Specification for Air, Specification G-7.1, 1966

11.2.2 Compressed Air for Human Respiration, Pamphlet G-7, 1968

11.3 Interstate Commerce Commission; U.S. Department of Transportation

11.3.1 Code of Federal Regulations, Title 49, Parts 71-90, Rules and Regulations for the Transportation of Explosives and Other Dangerous Articles

11.4 U.S. Department of the Interior, Bureau of Mines. See A2.1 in the Appendix to this Standard.

11.4.1 Schedule 13E, Self-Contained Breathing Apparatus, Code of Federal Regulations, Part II, Subchapter B, Chapter 1 of Title 30.

11.4.2 Schedule 14F, Gas Masks, Code of Federal Regulations, Part 13, Subchapter B, Chapter 1 of Title 30.

11.4.3 Schedule 19B and Amendments to Schedule 19B, Supplied-Air Respirators, Code of Federal Regulations, Part 12, Subchapter B, Chapter 1 of Title 30.

11.4.4 Schedule 21B, Filter-Type Dust, Fume, and Mist Respirators, Code of Federal Regulations, Part 14, Subchapter B, Chapter 1 of Title 30.

11.4.5 Schedule 23B, Nonemergency Gas Respirators (Chemical-Cartridge Respirators Including Paint-Spray Respirators), Code of Federal Regulations, Part 14a, Subchapter B, Chapter 1 of Title 30.

11.4.6 Performance of Open-Circuit Self-Contained Breathing Apparatus at -25° F. R.I. 7077, 1966.

11.4.7 Low-Temperature Performance of Compressed-Oxygen Closed-Circuit Breathing Apparatus. R.I. 7192, 1968.

11.4.8 Information Circular 8281 (October 1, 1965 and annual supplements). Respiratory Protective Devices approved by the U.S. Bureau of Mines.

11.5 U.S. Department of Agriculture

11.5.1 Respiratory Devices for Protection Against Certain Pesticides, ARS-33-76-2. February 1966 (addendum March 1, 1966).

11.6 General Services Administration

11.6.1 Federal Specification BB-A-1034a (June 21, 1968). Air, Compressed for Breathing Purposes.

11.6.2 Interim Federal Specification GG-B-00675b (April 27, 1965). Breathing Apparatus, Self-Contained.

11.7 American Industrial Hygiene Association and American Conference of Governmental Industrial Hygienists.

11.7.1 Respiratory Protective Devices Manual, 1963.

11.8 National Fire Protection Association

11.8.1 Breathing Apparatus for the Fire Service, 1966.

11.9 American Conference of Governmental Industrial Hygienists

11.9.1 Threshold Limit Value of Air-Borne Contaminants for 1968, Recommended and Indexed Values. (1968 or latest revision.)

11.9.2 Documentation of Threshold Limit Values, 1962. (1962 or latest revision.)

Appendix

Respirator Approval and Acceptance Listings

(This Appendix is not a part of American National Standard Practices for Respiratory Protection, Z88.2-1969, but is included for information purposes only.)

A1. Approved or Listed Respirators

The Department of the Interior, Bureau of Mines, and the Department of Agriculture publish frequently revised lists of respirators. Samples of these have been tested and found to provide satisfactory respiratory protection against specific hazards or contaminants.

A1.1 Respirators Approved by the Department of the Interior, Bureau of Mines. A list of respirators approved by the Department of the Interior, Bureau of Mines, may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

A1.2 Respirators on Lists Published by the Department of Agriculture. A list of respirators for respiratory protection against certain pesticides may be obtained from the Department of Agriculture, Pesticide Chemicals Research Branch, Beltsville, Maryland 20705.

A2. Requirements for and Tests of Respirators

Requirements and testing procedures for respirators have been established and published by the Department of the Interior, Bureau of Mines, and the Department of Agriculture.

A2.1 Department of the Interior, Bureau of Mines, Requirements and Tests. Requirements for approval of most types of respirators used have been established. These requirements are published as the Department of the Interior, Bureau of Mines, schedules. A current list of these schedules appears in Section 11, References. These schedules are frequently revised and each subsequent revision is assigned a succeeding terminal letter (for example, schedule 19B is a revision of schedule 19A).

Copies of the most recent schedules may be obtained from the Publications Distribution Section, Department of the Interior, Bureau of Mines, 4800 Forbes Avenue, Pittsburgh, Pennsylvania 15213.

The Department of the Interior, Bureau of Mines, approval on a respirator continues in effect even though the schedule under which the respirator was approved has been revised one or more times. If the user wishes to check the minimum performance he may expect from an approved respirator, he should consult the schedule which was in effect when the approval was granted. Certain respirators are upgraded by the manufacturer to meet the requirements of more recent schedules. In general, each schedule revision makes the requirements more severe. A complete list of schedules and their effective dates, and a list of schedules under which each respirator has been approved, will be found in the Bureau's list of approved respirators.

Responsibility for testing and approval of pesticide respirators has been transferred to the Department of the Interior, Bureau of Mines.

A2.2 Department of Agriculture Requirements and Tests. The Department of Agriculture previously established requirements and tests for respirators intended to provide respiratory protection during the application and handling of pesticides. The requirements and tests are described in a publication of tests and requirements for respirators designed to provide respiratory protection against pesticides. The publication may be obtained from the Department of Agriculture, Pesticide Chemicals Research Branch, Beltsville, Maryland 20705.

In the Department of Agriculture's tests, pesticides were dispersed as water sprays, oil sprays, or dry dusts to simulate formulations used in field applications. Chemical cartridges were tested for one hour and gas mask canisters for four hours. Insect bioassay methods were used to determine the efficiency of canisters and cartridges.

The Department of Agriculture did not evaluate facepiece fit of chemical-cartridge respirators or gas masks. It did not test respirators for protection against rodenticides, herbicides, and fungicides.

A3. Selection of Other Than Approved or Listed Respirators

For special purposes the user may need to select a respirator which has not been submitted to the Department of the Interior, Bureau of Mines, or to the Department of Agriculture for testing, or cannot be tested by these agencies because it is outside their approval or testing authority. Among these are special-purpose respirators for which user demand does not warrant submitting the devices for testing or approval.

The user should compare unapproved respirators with similar approved or listed devices to evaluate the facepiece and other parts to assure himself that the manufacturer, or other reliable organization, has tested the filters, cartridges, or canisters, that they are adequate for the required service, and that quality control during manufacture can be expected. He should make or have made suitable tests of the respirators' effectiveness which, as far as feasible, simulate tests made by the official testing agencies.

American National Standards

The standard in this booklet is one of nearly 4,000 standards approved to date by the American National Standards Institute, formerly the USA Standards Institute.

The Standards Institute provides the machinery for creating voluntary standards. It serves to eliminate duplication of standards activities and to weld conflicting standards into single, nationally accepted standards under the designation "American National Standards."

Each standard represents general agreement among maker, seller, and user groups as to the best current practice with regard to some specific problem. Thus the completed standards cut across the whole fabric of production, distribution, and consumption of goods and services. American National Standards, by reason of Institute procedures, reflect a national consensus of manufacturers, consumers, and scientific, technical, and professional organizations, and governmental agencies. The completed standards are used widely by industry and commerce and often by municipal, state, and federal governments.

The Standards Institute, under whose auspices this work is being done, is the United States clearinghouse and coordinating body for standards activity on the national level. It is a federation of trade associations, technical societies, professional groups, and consumer organizations. Some 1,000 companies are affiliated with the Institute as company members.

The American National Standards Institute is the United States member of the International Organization for Standardization (ISO), the International Electrotechnical Commission (IEC), and the Pan American Standards Commission (COPANT). Through these channels American industry makes its position felt on the international level. American National Standards are on file in the libraries of the national standards bodies of more than 50 countries.

For a free list of all American National Standards, write:

American National Standards Institute, Inc
1430 Broadway New York, N. Y. 10018

100406

3-27-75 Munroe de Vint ~~sent~~ and if this way he called Voss who
 said JMS misunderstood him. Later on NIOSH is expected to
 approve old half face piece masks we have with certain change
 like longer screws than 1/4 inch should be OK. I should
 mention to be sure of this latter documenting of Scott's parts.

JMS
 see my note on
 sheet.
 net 3-6

Respiration

Per phone w Ron Veinard - The
 last batch of constant flow respirators
 we got are good for 100 ppm VCM up
 till 1900m bar granfath's choice - He
 checked this out w NIOSH - Also NIOSH
will then the old style would be
if they put the larger screws
them! Scott is now willing
retrofit ours.

DHF is investigating on recording in

20 Welch full face gas mask

100407

✓
JING
see my note on memo
sheet.
net 3-6

Respirators -

Per phone w/ Ron Veisard - The
last batch of constant flow respirators
we got are good for 1500 ppm VCM up
till 1900 under grandfather clause - He
checked this out w/ NIOSH - Also NIOSH
told them the old style would be
OK if they put the larger screen
in them! Scott is now willing
to retrofit ours.

DHF is insisting on sending us
20 Welch full face gas masks

100408

which are NIOSH approved.

We need to review just
how valid our 10 ppm exposure
are —

[Signature]

3-9-75

John,

26 CSHA standard says "any chemical
cartridge respirator with an organic
vapor cartridge which provides a
service life of at least one (1) hour
for concentrations of vinyl chloride
to 10 ppm."

No indicator
required at this
time. (Confirmed by
Vicard)
I am sure Wilson's and
also confirmed with
11-26-74 letter from
Ed Bauer acting as
NIOSH to AL (SHA)
But I don't see the need for it.
With our levels of VCM that
we've achieved I see no need
for full face gas masks for
25 ppm — But it looks
like they are
coming.

RESPIRATORY PROTECTION DESIGNS?

One OSHA section stipulates that "approved or accepted respirators shall be used . . ." The U.S. Department of the Interior, Bureau of Mines is indicated in this section as the agency responsible for approving respirators — a notion which is historically correct since the Bureau has long been active in this area. More recently, however, approval for respirators has been delegated to two new agencies — NIOSH and MESA.

NIOSH (National Institute for Occupational Safety & Health) which comes under the auspices of the U.S. Department of Health, Education & Welfare, was created by the OSHA Act. Its primary responsibility is to provide technical support and develop critical documents for OSHA. Since 1972, however, NIOSH has joined with the Interior Department's MESA (Mining Enforcement Safety Administration) in approving respiratory equipment.

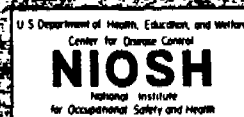
A joint NIOSH/MESA approval on a respiratory device can be recognized in two ways:

- Instead of the older, single Bureau of Mines seal on the approval plate, both NIOSH and MESA seals are now present.

- The specific approval number assigned to an individual device, formerly prefixed by "BM" (for Bureau of Mines), is now preceded by "TC" (Tested and Certified by NIOSH/MESA).

While the Bureau of Mines is no longer involved in granting respiratory device approvals, BM-approved devices purchased before June, 1975 are still considered legal and valid. After that date, only NIOSH/MESA-approved equipment should be purchased.

It should be remembered that BM-approved devices have a limited use life, while NIOSH/MESA devices do not. Use life tables for BM-approved devices can be obtained from a reputable supplier of approved respirators, or from your local OSHA office.



100410

8-8-75

September 29, 1975

Building E-2 Supervision

Subject: Air Mask Breathing Air CO Alarm

~~A meter has been installed to monitor the concentration of CO (carbon monoxide)~~
in the air mask air. These instructions should be followed:

Normal Operation

1. Never turn the top selector switch to purge.
2. Check the white plastic cup once per week for water level. The cup should be kept 3/4's full of city water.
3. During normal operation let the lower selector switch be turned toward alarm.

Should the alarm sound:

1. Silence the alarm.
2. Open air supply to the temporary purifier cartridge next to the alarm. Open valves to allow this unit to come "on stream".
3. Close off the normal air supply line coming from N-2 building purifying system.
4. The alarm monitors only the air in the N-2 purification system so the light will stay lit, until the purifying cartridge "BA-9" has been changed.
5. Write a Repair Order to replace the "BA-9" cartridge in the N-2 building purifying system. Also request that the alarm be calibrated with 20 ppm. Please date the order.

Should any questions arise, contact P. E. Miller, Ext. 56.

~~When the alarm sounds, 20 ppm or more of CO are present in the breathing air.~~
At this point the hazard to man is minimal but nevertheless the cartridge should be changed. Fifty (50) ppm is the current maximum allowable 8-hour exposure for CO according to recent OSHA regulations.



P. E. Miller
Staff Engineer

PEM/gso

cc M. Trowbridge
A. Hewitt
R. H. Evans
J. M. Gilmore
File (2)
Post (2)

100411

June 9, 1975

cc: JM Gilmore / JF Blickley
M Trowbridge DJ Snyder
RH Evans WC Toner

To: Mr. S. H. Kernaghan
Technical Superintendent

Subject: Breathing Air Quality, June 4, 1975.

<u>Compound</u>	<u>Test</u>	<u>Analytical Result</u>	<u>Detection Limit</u>	<u>Max. Spec. CGA Type D</u>
Oxygen	Orsat	20%	0.5%	19.5 - 23.5
Carbon Monoxide	MSA #91229	None Detected	10. ppm	20 ppm
Carbon Dioxide	MSA #85976	None Detected	10. ppm	1,000 ppm
Hydrocarbons	MSA #930N	None Detected	5. ppm	5 ppm
Sulfur Dioxide	MSA #92623	None Detected	1. ppm	—
Vinyl Chloride	O.S.H.A.	None Detected	0.05 ppm	—
Dew Point	Standard	- 15°C	—	—

Submitted for approval 6/4/75.



R. F. Mitchell
Chief Chemist

RFM:smw

100412

5-9-75
 ① T. Frank 5/9
 ② R. Richardson
 ③ A. Hewitt
 ④ D-145 Supervisor
 ⑤ MT

May 7, 1975

cc: JM Gilmore
 M Trowbridge
 RH Evans

JF Blickley
 DJ Snyder
 W Toner

To: Mr. S. H. Kernaghan
 Technical Superintendent

Subject: Breathing Air Quality May 2, 1975, for Air Masks.

<u>Compound</u>	<u>Test Applied</u>	<u>Result of Analysis</u>	<u>Detection Limit</u>	<u>Type D OGA Spec</u>
Oxygen	Orsat Standard	21%	---	19.5-23.5%
Carbon Monoxide	MSA #91229	N.D.	10. ppm	20 ppm
Carbon Dioxide	MSA #85976	N.D.	10. ppm	1,000 ppm
Hydrocarbons	MSA #93074	N.D.	5. ppm	5 ppm
Sulfur Dioxide	MSA #92623	N.D.	1. ppm	---
Vinyl Chloride	O.S.H.A., E.P.A.	N.D.	0.05 ppm	---
Dew Point, °C	Standard	-80C	---	---

N.D. = None Detected.

Sample - 225 Liter Bag Sample - W. Toner.

Shows our mask supply air is good.

R. F. Mitchell
 R. F. Mitchell
 Chief Chemist

D. A. Webb
 D. A. Webb
 Senior Lab Technician

RFM:DAW :maw

100413

3-27-75
MINN
TLP
MS

Zephyrair

Review for me

- ① Too much air — Evans has to fix ^{During new 3-27-75}
- ② We can no way (at this time) use our old masks after 4-1-75 ~~use~~ or hoses for 1000 ppm.
- ③ Need carbon cartridge in Z — ?
What is cartridge there for? Oil, H₂O — not for V₂ purposes.
We filter our air
We purify it for CO₂ & H₂O
OK from practical standpoint — how long will the cartridges last — ~~stop~~ On our air — should ~~be~~ last long time?

How know when need replacement?
Lack of air will tell it is blinded.

SCOTT
A-T-O

Air & O₂
Gas Mask
Respirator } groups

11-2-77 10/15/74 used no
Seal (Vorsard).

Industrial Safety
Equipment Assoc.

20 November 1974

The following is a revision of the respiratory protective devices as outlined in 29CFR 1910.939 as submitted by the Three Respiratory Groups of the ISEA as requested by OSHA.

(i) Unknown, or above 3600 ppm (A) Self-contained breathing apparatus positive pressure with full facepiece.

(ii) Not over 3600 ppm

(A) Combination type C supplied air respirator, pressure demand, with full facepiece and auxiliary self-contained air supply.

(iii) Not over 100 ppm

(A) Type C supplied air respirator, pressure demand type with full facepiece.

(B) Type C supplied air respirator, continuous flow type with full facepiece, 1/2 facepiece helmet, hood or suit.

(C) Type C supplied air respirator, demand type with full facepiece, with or without auxiliary self-contained air supply.

(D) Type A or Type B hose mask with full facepiece.

(E) Open circuit self-contained breathing apparatus, demand type, with a full facepiece.

(F) Closed circuit self-contained breathing apparatus with a full facepiece.

(A) Combination Type C supplied air respirator, any class, with a chemical canister with a full facepiece which provides a minimum service life of 1 hour.

(B) Powered air-purifying respirator with a hood helmet, full or half facepiece and a canister which provides a minimum service life of 1 hour.

(iv) Not over 50 ppm

half face piece, continuous flow + auxiliary meets 1000 ppm. But ISEA did not put it on list because they didn't want too many categories. I complained to Vorsard about this.

100415

(v) Not over 25 ppm

(A) Powered air-purifying respirator with hood, helmet, full or half facepiece and a canister which provides a minimum service life of 4 hours.

(B) Gas mask, front or back mounted canister, full facepiece, which provides a minimum service life of at least 4 hours.

(vi) Not over 10 ppm

(A) Type C supplied air respirator, demand type with half facepiece.

(B) Combination Type C supplied air respirator with half facepiece and a canister which provides a minimum service life of 1 hour.

(vii) Not over 5 ppm

(A) Any chemical cartridge respirator which provides a minimum service life of 1 hour.

No indicator required

*(ii B ~~does not~~ deleted)
in OSHA std.*

*Could take ii A, remove auxiliary & then it would
become ~~iii B~~
iii A*



October 28, 1974

TO: All Air Supplied Respiratory Distributors

VINYL CHLORIDE

The Federal Register, Volume 39, Number 194, part 11, dated Friday, October 4, 1974, contains the Standard for Exposure to Vinyl Chloride.

I have copied the following portions of that standard for your edification and use:

(c) *Permissible exposure limit.* (1) No employee may be exposed to vinyl chloride at concentrations greater than 1 ppm averaged over any 8-hour period, and

(2) No employee may be exposed to vinyl chloride at concentrations greater than 5 ppm averaged over any period not exceeding 15 minutes.

(3) No employee may be exposed to vinyl chloride by direct contact with liquid vinyl chloride.

(g) *Respiratory protection.* Where respiratory protection is required under this section:

(1) The employer shall provide a respirator which meets the requirements of this paragraph and shall assure that the employee uses such respirator, except that until December 31, 1975, wearing of respirators shall be at the discretion of each employee for exposures not in excess of 25 ppm, measured over any 15-minute period. Until December 31, 1975, each employee who chooses not to wear an appropriate respirator shall be informed at least quarterly of the hazards

of vinyl chloride and the purpose, proper use, and limitations of respiratory devices.

(2) Respirators shall be selected from among those jointly approved by the Mining Enforcement and Safety Administration, Department of the Interior, and the National Institute for Occupational Safety and Health under the provisions of 30 CFR Part 11.

(3) A respiratory protection program meeting the requirements of § 1910.134 shall be established and maintained.

(4) Selection of respirators for vinyl chloride shall be as follows:

Atmospheric concentration of vinyl chloride

(i) Unknown, or above 3,000 ppm

(ii) Not over 3,000 ppm

(iii) Not over 100 ppm

(iv) Not over 25 ppm

(v) Not over 10 ppm

Open-circuit, self-contained breathing apparatus, pressure demand type, with full facepiece.

Combination type C supplied air respirator, pressure demand type, with full or half facepiece, and auxiliary self-contained air supply; or

(B) Type C, supplied air respirator continuous flow type, with full or half facepiece, and auxiliary self-contained air supply.

(A) Combination type C supplied air respirator demand type, with full facepiece, and auxiliary self-contained air supply; or

(B) Open-circuit self-contained breathing apparatus with full facepiece, in demand mode; or

(C) Type C supplied air respirator, demand type, with full facepiece.

(A) A powered air-purifying respirator with hood, helmet, full or half facepiece, and a canister which provides a service life of at least 4 hours for concentrations of vinyl chloride up to 25 ppm, or

(B) Gas mask, front- or back-mounted canister which provides a service life of at least 4 hours for concentrations of vinyl chloride up to 25 ppm.

(A) Combination type C supplied-air respirator, demand type, with half facepiece, and auxiliary self-contained air supply; or

(B) Type C supplied-air respirator, demand type, with half facepiece; or

(C) Any chemical cartridge respirator with an organic vapor cartridge which provides a service life of at least 1 hour for concentrations of vinyl chloride up to 10 ppm.

These circled are approved by NIOSH & MSHA and produced by one or more manufacturers.

(5) (i) Entry into unknown concentrations or concentrations greater than 36,000 ppm (lower explosive limit) may be made only for purposes of life rescue; and

(ii) Entry into concentrations of less than 36,000 ppm, but greater than 3,600 ppm may be made only for purposes of life rescue, firefighting, or securing equipment so as to prevent a greater hazard from release of vinyl chloride.

(6) Where air-purifying respirators are used:

(i) Air-purifying canisters or cartridges shall be replaced prior to the

expiration of their service life or the end of the shift in which they are first used, whichever occurs first, and

(ii) A continuous monitoring and alarm system shall be provided where concentrations of vinyl chloride could reasonably exceed the allowable concentrations for the devices in use. Such system shall be used to alert employees when vinyl chloride concentrations exceed the allowable concentrations for the devices in use.

(7) Apparatus prescribed for higher concentrations may be used for any lower concentration.

To date, the following classes of equipment have been approved by NIOSH which can be used to satisfy the requirements:

Atmosphere Concentration of VC

Scott's position at present (11-21-74)
NIOSH approvals

(i) Unknown or above 3,600 ppm	<i>Scott</i>	Pressure Demand SCBA	yes
(ii) Not over 3,600 ppm	<i>Expt Mid Feb</i>	(a) Pressure Demand Ska-Pak*	*
		(b) - Constant Flow w/SCBA	*
(iii) Not over 100 ppm	<i>Expt Mid Feb</i>	(a) Ska-Pak Demand - Full Facepiece	yes
	<i>Scott</i>	Air-Pak*	yes
	<i>Logo</i>	(c) Demand Airline - Full Facepiece	yes
(iv) Not over 25 ppm		(a) Powered Air Purifying	*
		(b) Gas Mask <i>no one have approved</i>	*
(v) Not over 10 ppm	<i>Expt Mid Feb</i>	(a) Ska-Pak - Demand, 1/2 Facepiece	yes
	<i>In since May</i>	(b) Demand Airline, 1/2 Facepiece	yes
		(c) Chemical Cartridge Respirator <i>no one have approved</i>	

*Equipment is being prepared for submission to NIOSH.

I will keep you posted.



Ronald C. Voisard
Manager, Distributor Development
and Technical Services

100418

12-5-74	Air Line Masks	
	spare	- - - 1
E-2	oper	- - - 3
	sup	- - - 1
	cleaners	- - - 4
C-1		- - - 2
C-2		- - - 2
K		- - - 2
	Maint. shift	- - - 8
	Hawitt	- - - 1
	Foreman	- - - 4
	Monitors	- - - 4
	Maint	- - - 8
	spare + misc	- - - 1
		4

100419

12-5-74

Scott Air Paks

- 3 new ones ordered
- Want ours modified to meet Praxair for OSHA. Do on site if possible.

Continuous Flow

- Type C supplied air respirator, continuous flow type, with full or half face piece, helmet or hood
- Convert ours?
- We have 25
- Want to order 24 new ones to be delivered as soon as they have NIOSH/MESA approval

100420

Protective Equipment Supply

Thompson

12-10-74

W. Fall 44

TOTAL	100421
-------	--------



*File
Respirators*

PROTECTIVE EQUIPMENT SUPPLY CO., INC.
1243 MILITARY ROAD • P.O. BOX 190
BUFFALO, N. Y. 14217
AC/716 874-4700

Protective Equipment Supply

May 9, 1974

Mr. M. Trowbridge
Goodyear Tire & Rubber Co.
5408 Baker St.
Niagara Falls, New York 14300

Dear Mr. Trowbridge:

I would like to re-cap a portion of conversations we have had in the last few weeks regarding respiratory equipment to meet breathing requirements in areas where Vinyl Chloride is present.

Due to the fact that certain areas are still not quite clear with regard to interpretations, may I suggest you consider the use of the Zephyair Mask (literature attached), which most certainly meets the requirements.

There has been a lack of consistency in the recommendations, which has created some confusion.

Thank you for your interest.

Very truly yours,
PROTECTIVE EQUIPMENT SUPPLY CO., INC.

James A. Minneci
James A. Minneci
President

JAM/eb
Enc.

100422

SECTION 1 Acme Catalog

198
No. 10. Not
submitted.

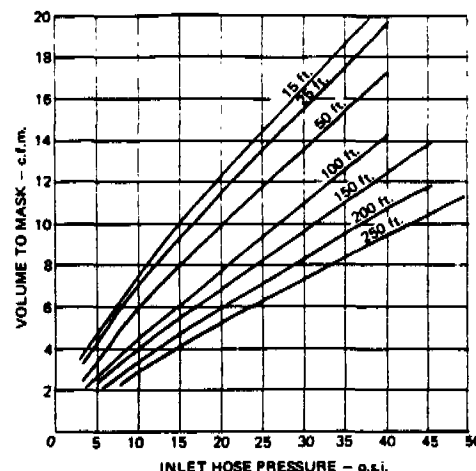
In compliance with
requirements under grand
SCOTT
19C approved ATO
Has TC no.



Ideal for use in atmospheres where full face protection is not required or when goggles or glasses must be worn.
U.S. Bureau of Mines approved.



The full face model offers maximum protection and comfort.
U.S. Bureau of Mines approved.



To determine volume (CFM) of air delivered to the facepiece, use this chart. From the regulator gauge reading as shown on the bottom line, follow this line upward until you reach the curve showing the length of air hose being used. The intersection of these two lines can then be read in CFM from the vertical figures at the left margin. These figures are based on "ZEPHYRAIR" masks having NO manual control valve or on masks when the manual control valve is in the full open position.

ACME PATENTED "ZEPHYRAIR" MASKS OFFER TWO BASIC FACEPIECE MODELS

THEY PROVIDE RESPIRATORY PROTECTION AGAINST GASES, VAPORS, DUSTS, FUMES ETC. WITH MAXIMUM COMFORT AND SAFETY. CONSERVATIVE AIR CONSUMPTION.

DESCRIPTION

ACME "ZEPHYRAIR" masks are designed to provide respiratory protection for long periods of use with utmost comfort to the worker, consistent with safety. The patented "ZEPHYRAIR" feature is accomplished by a unique disc mounted within the facepiece. It prevents sudden air blasts from entering the facepiece: thus assuring a gentle and comfortable flow of air at all times to the user at any pressures. Air pressure within the full facepiece will not exceed 1½ inches on a water manometer, .6 inches within the half-mask model.

These mask units can be operated from regular plant air sources including ACME Portable Compressed Air Stations, cylinders of compressed air or from ACME'S Portable Air Compressors.

Adjust Air Pressures As Follows - 3/8" ID Hose

Hose Length	Pressure At Hose Inlet
15' to 50'	8 to 17 PSI
50' to 250'	17 to 30 PSI

When regular plant compressed air is used, such air should be filtered to remove oil vapors, odors, moisture and other such impurities. The air should also be FREE of any toxic materials. Appropriate reducing valves, relief valves, etc. should also be provided. (See illustration this circular.)

The filter body shown at the waist end of the corrugated hose can be positioned by a belt clip or permanently attached to a sturdy, adjustable fabric belt. A stainless steel spring inside the corrugated hose prevents kinking. A manual control valve can be provided to enable the wearer to adjust the air flow to the facepiece as desired.

ORDERING INFORMATION

KEY NOTE: -1 After Catalog No. indicates the ACME FULL-VISION "ZEPHYRAIR" Facepiece is supplied
-3 After Catalog No. indicates the ACME DUO-SEAL "ZEPHYRAIR" Facepiece is supplied

Catalog Nos. { 4615-1 } Complete Mask Unit (Less Case)	Catalog Nos. { 4620-1 } Complete Mask Unit, (Less Case)
{ 4615-3 } Belt Clip Model	{ 4620-3 } Filter Body, Belt Mounted
Catalog Nos. { 4616-1 } Same as 4615 Except With (Less Case)	Catalog Nos. { 4622-1 } Same as 4620 Except With (Less Case)
{ 4616-3 } Manual Control Valve	{ 4622-3 } Manual Control Valve

Carrying Cases Available (Specify). See Accessories and Replacement Parts on the Back of this Circular.

Go for safety, first...go SCOTT

100423

1-24-75

Scott Air Park - G. Tower, MT

Status

5 - 6000 series

in N-2

9 - 900 series

in service in
the plant. Have not yet
been converted to P/D

11 - Scott Air Park II

all are in service in plant

1-24

I called Evans for a Z Bill which
Luca said he had been waiting for
for several weeks. RHE said he'd
get Z Bill right away. As soon as
JK has it he will get the 9 - ~~900~~ series
Parks to Minacci.

100425

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
CENTER FOR DISEASE CONTROL
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

TO : Mr. Al Reis
Occupational Safety and Health
Administration, DOL

DATE: November 26, 1974

FROM : Acting Director, NIOSH

SUBJECT: NIOSH Testing and Certification of Respirators for Protection from
Exposure to Vinyl Chloride

This will confirm our telephone conversation this morning regarding the above subject.

NIOSH has set up a special room at its Morgantown, West Virginia, facility to handle the gas so that NIOSH personnel will not be exposed. NIOSH personnel who will be involved in testing have undergone or will undergo physical examinations. This has been done in accordance with DHEW procedures for handling carcinogenic substances.

The system is now in place and ready to function as soon as manufacturers submit their respirators to us. A draft protocol was prepared, and an information copy was delivered to you last Friday. The protocol will be reviewed by the Department of the Interior and DHEW and will be published in the Federal Register.

The requirement for an end of service life indicator is not now required, however, the section of the protocol was drafted to read:

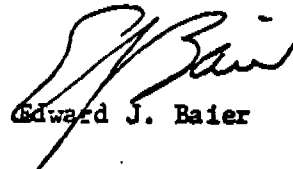
"After June 30, 1975, each canister or cartridge submitted for approval and testing in accordance with Sections 11.202, 11.203, and 11.204 shall be equipped with a canister or cartridge end of service life indicator which shows a satisfactory indicator change or other obvious warning before 1 ppm vinyl chloride penetration occurs. The indicator shall show such change or afford such warning at 80 +10 percent of the total service life to 1 ppm leakage, as determined by continuing each test described in subparagraphs (b) of each of Sections 11.202, 11.203, and 11.204 of this subpart until a 1 ppm leakage of vinyl chloride occurs. After December 31, 1975, a cartridge or canister without a service life indicator shall not be considered approved for use by employees exposed to vinyl chloride."

100-100

Page 2 - Mr. Al Reis

Also, as you requested we have changed the draft to include testing of canisters for longer than 4-hours. Assuming these canisters will not distort the face piece, which would immediately disqualify them, I want you to know that longer than 4-hour approval testing will delay our output. We cannot test for all periods of time in the same amount of time available for 4-hour approval tests. Since you asked for this and we can accommodate your request, we want you to know of the ramifications. We had set up our protocol initially on a 4-hour basis, because this was arrived at by you and Dan Boyd during a previous meeting here at Rockville on the subject of respirators for VC.

If there's anything further on the subject, please let me know.


Edward J. Baier

100427

JMG:Juro

12-9-74

I Scott Air Paks

① On hand 9 900 series - to be converted
 " 5 6000 " - can't be converted

② Ordered 3 Procom-Pak II - delivery 1st week in Jan.

③ Minnaco will start converting abt. 9. He has 3 or 4 "loaners". Will convert at Protective Equipment.

④ I think we are too low on Paks. We previously discussed this & estimated we needed 20 in Vangh alone.

E-2	2 upstair
	2 downstair
N-2	6 spares
C-1	2
K-1	2
spares	6
	<u>20</u>

100428

2

II Air Line Respirators

① Minnecchi said our existing masks could not be converted. Late Friday Vaisard returned your call & I asked him if they could be converted. He said "maybe" — he'd discuss with Minnecchi.

② Scott's "Zephyrain" meet ^{Don't have TC no. without submitted with} the ~~half face~~ ^{half face} OSHA, Continuous Flow, half face requirement.

Price

One set (incl. 25' $\frac{3}{8}$ " hose) = 54.61

Additional 25' hose = 19.40

Plus Belt is about 3.00

③ While we are hashing out details of converting or not, I played it safe and placed order which can be adjusted downward if you see fit. (Ship date about 12-31-74).

Next page

3

E-2	Operators	3
	Cleaners	4
	Supervisor	1
	Spare	1
	C-1	2
	C-2	2
	K	2
	Maint. Dept	8
	Hewitt	1
	Foremen	4
	Monitors	4
	Shift mechanics	8
	Spares + Misc.	<u>8</u>
		48

Note: On the conversion of ours (20 to 25 are on hand, we're getting them counted) I suggest you talk to Menaldi or Vaisard. Jim M- is nervous as the dickens about compliance if we convert them.

mt

Ron Vossard, Jim Minacchi, JMS, MT 12-10-74

① Scott's Air Paks

Convert our 9 - 900 series now

Buy 8 more

3 on order

Total = 20

② Air line respirators

Zephyrair with full face piece has TC no.

Zephyrair with half " " has no TC no.

It wasn't submitted by Scott. It is
in compliance with OSHA requirements
under grandfather clause.

Our existing half face masks can't be
converted & put into compliance as a
continuous flow unit.

Decision: Buy 48 Zephyrairs - half face
pieces. Next year when Scott gets
approval of half masks (^B7) then all we
have to do is buy new face pieces.
Rest of system is made up of approved
parts (i.e. full face Zephyrair system). 100431

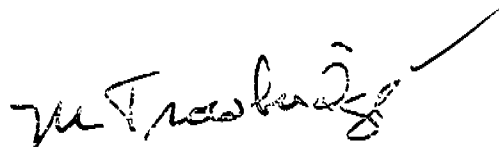
April 10, 1975

To: All Vinyl Personnel

Subject: Willson Cartridge Respirators

This is to clarify some questions about your Willson respirators.

1. You must have your respirator with you when you enter a regulated area.
2. If you use your respirator at any time during the shift, discard the cartridges at the end of that shift.
3. The approved service life for the carbon cartridges is 1.0 hour breathing in a VCM level of 10 ppm. For example, this would be equivalent to 2.0 hours at 5 ppm. Anytime you reach the end of the approved service life, replace your cartridges.



ME:cr
cc: JM Gilmore
J Pollock
RH Evans
RH McCain
145 Suprv

M. Trowbridge
General Foreman
Vinyl Products

Post: F-1
F-3
E-2

100432

~~F. F. Franzen~~ 6/76
m5

Route

To: Plant Managers
Caneby & Hodges Company

As of January 1, 1971, Bureau of Census approved procedures used for data processing are no longer approved by OGC.

Only NIAH or NIAH approved organizations for drug, human, animal or organic research are to be used in Goldenrod Florida.

Each Plant will receive a copy of Handbook of Infectious Diseases and Hygiene Manual for guidance and reference in the use of Ontario.

IF there are **a different number contracts of:**

G. L. Fisher
CF

cc: C. A. Johnson, Jr.
R. C. Macrae
R. C. Thompson

100433

April 5, 1974

To: All Vinyl Personnel

The respirators now being issued are to be turned in to the Shift Foreman's Office on Friday mornings after your 12-8 shift.

The respirator will be washed, disinfected, dried and repairs or replacement made to defective parts.

Masks will be ready for your use when you return for your 4-12 shift. They should be picked up in the Shift Foreman's Office.

TLF:er
cc: JM Gilmore
J Pollock

J. Frampton
T. Frampton
Foreman

100434

John Kuca
Please handle & order.

Reminder 4-10-75
Sgt. [Signature]
4-4-75

PO 36533
Please 4-4-75
14 more
J. Kuca

14 Zephyrair arrived 4-17-75 being
labeled & distributed by T.F. Culwick

The E-2 men and Utility men
are asking for personal Zephyrair
masks. They don't like to use
the 3 hanging in E-2 for general
E-2 operator use. I agree
with them. With 14 more
masks ~~and~~ and reduction in general
use masks we can let all
12 E-2 men, ~~4~~ Utility Man, and the
1 E-2 relief man have their own
masks. (If I were they I
would want my own).

If you agree, tell Kuca to
order. (About an \$800 purchase)

In a few months we may ^{be able to} get
our old masks modified by Scott
and approved by OSHA — but
they won't go to waste. I foresee
the use of airline masks in D-245
in the near future in conjunction
with your monitoring plans. 100435
m

Respirators

12-6-74

J. Minnerick, NT

Scott Air Paks

9
5

On hand (demand) about ¹⁴~~15~~ Paks
900 series - can be converted to P/D
6000 series - can not be converted

Skimp

Have to be converted at ~~the~~ Protective Equip.
When NIOSH authorization comes thru
can put TC no. on the units - do
this at Goodyear.

Jim will get going on converting
all of our 900 series. He will
give us $3\frac{1}{4}$ or $4\frac{1}{8}$ loovers and
take $3\frac{1}{4}$ or $4\frac{1}{8}$ ~~out~~ of ours out
for conversion at a time.

~~After~~ After all of ours are converted then
we decide how many more to
buy.

We ordered 3 Proxair-Pak II
(Part no. 9000/1400) about 10 days
ago. Expect delivery 1st week
of Jan. 1975

100436

Type C, Continuous Flow half mesh

- Our existing air line masks can not be converted to ^{1/4" hose} ~~some~~ meet "Continuous Flow" requirements.

- New units "Zephyrair" are "Continuous Flow", half Face

- Set (incl ^{3/8" hose} 25' hose) = \$54.61
 - additional hose (25' length) = \$19.40

- Order 48 Zephyrairs (25' hose) = 2621.2
 15 25' hoses extra = 291.0
2912.2

- ^{Ship} ~~Delivery~~ 12-31-74 will call back to

If JMS wishes to reduce this order that will be OK with Jim.

Jim will double check to see if there is a possibility of our using our existing hose with the Zephyrairs.

100437

MT

1-10-75

~~JMG Moore~~

I checked out our air purifying systems with Evans, Toner, & Freeberg. Both the N-2 primary system and the E-2 spare are in good shape. (See the attached sketches for operation).

Toner watches the systems personally every day and he has instructed all fire crew members to watch them. Freeberg also watches. They are well watched.

I think everything is AOK and under control with the systems.

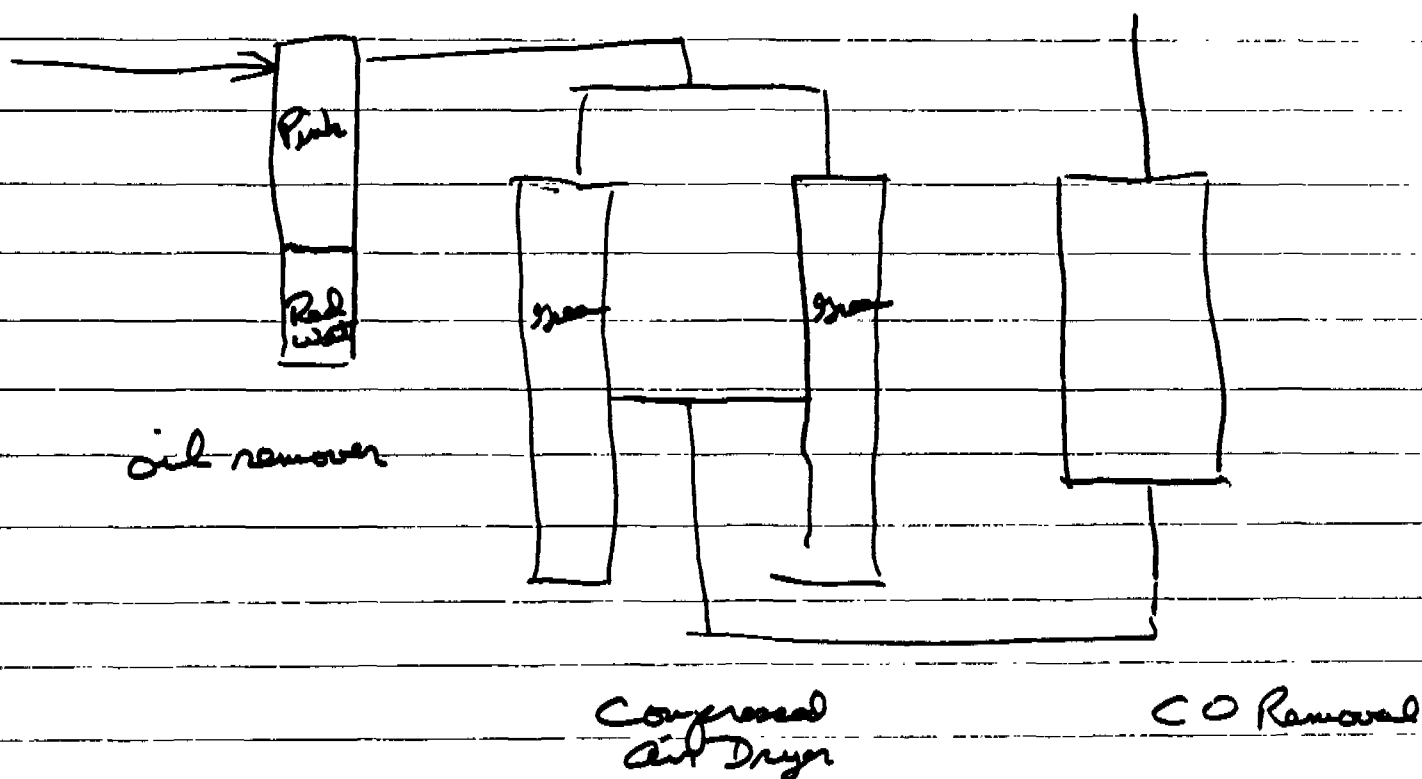
MT
Thanks - I thought that pink was red - JMG

100438

1-10-75

Breathing Air System

N-2 system uses plant air and is primary breathing air supply.



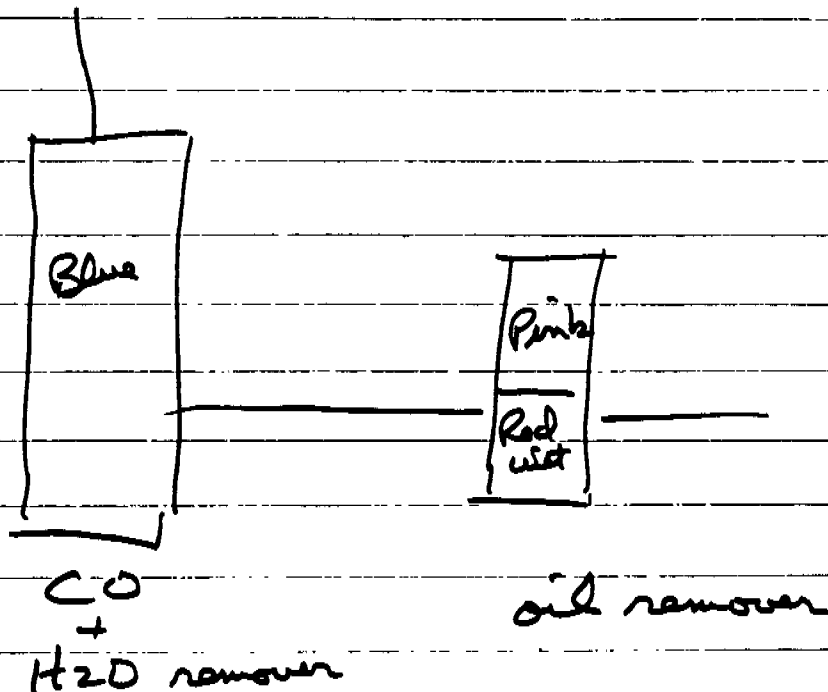
- The oil remover is OK as long as there is some pink solids in upper pot portion
- Dryer chambers switch every few minutes and are OK if front portions (facing viewer) are green
- CO remover has to be changed every 6 months or at 2,000,000 SCF. Our program is every 6 mos

100439

1-10-75

Breathing Air System

E-2 Tubes are only for use when N-2 system is out for repairs. It uses high pressure instrument air



- The oil remover is OK as long as there is pink solids in upper portion.
- CO & H₂O remover OK as long as there is blue material remaining. (The H₂O kills it fast)

100440

Jim Minner called

12-20-74

Scott Aene just told him they have
received word their gas mask
will be

not over 25 ppm

NIOSH Approved for VKM.

Full Face piece

6 hr canister

100441

Jim Minneci
J. Gilmore
m.t

10-24-74

I Existing Scott Air Paks

- Can make them meet NIOSH requirements, but can not put TC number on them at this time.
- after Jan 1, 1975, ^{or thereabouts} will have a kit, including tags which can be affixed with TC number.
- Not all of our Scott Paks can be modified.

900 series = can be modified
6000 " = can not be "

(Most of ours are 900 series).

- To convert 900 series will cost from 80 to \$95 each.
- Existing cylinders can be used.

II New Scott Air Paks that meet OSHA 19

Scott Air Pak, Presur-Pak II

Part No. 900014-00 (Complete with case & one cylinder of air)

\$510 each (less some discount)
(25-30)

Delivery about 4 weeks to 6 weeks
in quantities 20-30 units.

~~100442~~

100442

TLC
OSHA 11A

Combination Type C air supplied, pressure-demand, with half or full face piece and auxiliary self contained air supply.

We want:
half face piece

Minnesa say

- ~~can't~~ no one makes press/demand with half face piece. He points to ANSI standard p. 15, Table 3 (288.2)

which says press./demand = full face piece only.

- Doesn't agree that "combination" means two hoses (like MSA picture). He thinks it ~~is~~ means combining self-contained ~~and~~ and air line sources of air supply.

Quote on 11A but with full facepiece

Face pieces $\approx \$55$

Regulator, Harness, bottle $\approx \$125$

no TC yet →

Does not yet have TC number.
Submitted last May.

4-6 mths on face pieces

100443

(Harness
Regulators — 2-3 months
Bottles ~~are~~ + fittings compatible)

OSHA
ii A

Masks

Face Pieces

Respirator
Goggles
Harnesses

C-1		2
K		2
E-2		8
F		4
Maint.	120	12
Prod	120	
Supers.		
Spares	10	8
Monitors	8	4
Tech	4	
	142	40

OSHA
i

① ~~that~~ ~~of~~ ~~parent~~ ~~that~~ ~~Scott Air Park~~ modified
can get FC approval

E-2
2 upstair
2 downstair
N-2 6 spars
C-1 2
spars 6
K 2
20 complete
25

Existing Scott Air Park

100444

tr Hoses - 10 lengths

Scott Meeting

10-17-74

Jim Memachi
Ron VOISARD

JMG, RHC, SHK, MT, BB, JFB, McNeill, Dick, Hans, Gutter
Dee

Scott Pak

Demand = 100 factor (X TWA)

Pressure-demand = 10,000 factor

Air line

Pressure-demand = 2000 factor

We now have only demand Scott Air Paks in N.F.
Demand units can be converted to pressure-demand.

Breathing

~~instantaneous rate of 32 l/min used for~~
32 l/min = instantaneous rate

TC number = Testing Certification (Tested by NIOSH & certified)

OSHA Table in Standards

i Unknown or above 3,600 ppm

Use Scott Air Pak, pressure demand
Ours can be modified.

ii Not over 3600 ppm - no half face approved

4 (A) Use Scott full face, pressure demand
with Scott auxiliary

(B) Not make

100445

iii Not over 100 ppm

(A) Scott full face — demand — air line
Scott auxiliary

(B) Scott Air Pak, demand

(C) air line hose, demand, full face piece.

iv Not over 25 ppm

(A) Not made for organic vapors — only
for particulate matter.

(B) None approved by NIOSH for anything.

v Not over 10 ppm

(A) air line, demand, half facepiece
Scott auxiliary

(B) air line, demand, half facepiece

(C) Any chemical cartridge respirator with
cartridge service life of at least 1 hour
for VC come up to 10 ppm

None approved as yet.

② Scott has no TC approval for anything
except Air Pak.

No one else does either

100446

③ ~~any~~ Cartridges approved for organic vapors.
Not for VC specifically. However.

JM.
JMG
mt.

10-24-74

- Minneci will ASAP modify our
half face piece air line masks.

this will give us 1000 factor

couldnt do

100447

RESPIRATOR MAXIMUM USE CONCENTRATION SELECTION GUIDE¹ FOR PROTECTION AGAINST SPECIFIC AIRBORNE CONTAMINANTS² For 1974/75

Type Respirator (for non-emergency use) ³	Facepiece Pressure ⁴	Maximum Use Conc. Selection Guide Multiples of TWA and Ceiling ⁵
I. Air-Purifying		
A. <u>Particulates</u>		
<u>Type, Filter, Facepiece</u>		
Single Use, 6 Dust, 7 Valveless	-	5 <i>here upon average</i>
Single Use, Dust, with Valve	-	10
Dust, quarter or half mask	-	10
Fume, 8 quarter or half mask	-	10
Hi-Eff., ⁹ half mask	-	10
Hi-eff., full facepiece	-	100
Powered Hi-Eff., 1/2, FF, or Hood ¹⁵	+	1000 ¹⁰
Powered, Dust or Fume, All	+	x ¹¹
B. <u>Gases and Vapors</u>^{12, 2}		
Half mask <i>mouthpiece</i> Half mask facepiece	-	10 <i>Practical</i>
Full facepiece	-	100
II. Atmosphere-Supplying		
A. <u>Supplied Air, Mode, Facepiece</u>		
Demand, half mask	-	10
Demand, full face	-	100
<i>Hose mask w/o Blower, FF</i> Pressure-Demand, half mask ¹³	+	1000
Pressure-Demand, full facepiece ¹⁴	+	2000
<i>Hose mask w/ Blower, FF</i> Continuous Flow, half mask ¹³	+	1000
Continuous Flow, full facepiece	+	2000
Continuous Flow, Hood ¹⁵ <i>or helmet</i>	+	2000
Continuous Flow, Suit ¹⁶	+	2000

100448

RESPIRATOR MAXIMUM USE CONCENTRATION SELECTION GUIDE¹
FOR PROTECTION AGAINST SPECIFIC AIRBORNE CONTAMINANTS²

Type Respirator (for non-emergency use) ³	Facepiece Pressure ⁴	Maximum Use Conc. Selection Guide Multiples of TWA and Ceiling ⁵
II. Atmosphere-Supplying		
B. <u>SCBA,¹⁷ Mode, Facepiece</u>		
Open Circuit, Demand, FF	-	100
Open Circuit, Pressure-Demand, FF	+	10,000 ⁺
Closed Circuit, FF	-	100
Closed Circuit, FF	+	10,000 ⁺
Closed Circuit, MP (mouthpiece)	- or +	10,000⁺
III. Combination Respirator		
Any combination of air-purifying and atmosphere-supplying respirator.	MUC for type and mod of operation as listed above. USE MINIMUM MUC ABOVE FOR TYPE AND MODE OF OPERATION	
IV. <u>Emergency (no concentration limit)</u> <i>ENTRY INTO AND ESCAPE FROM UNKNOWN CONC</i>		
	1) <u>Self-contained breathing apparatus with <u>positive pressure</u> in facepiece.</u>	
	2) Combination supplied air respirator, pressure-demand type with auxiliary self-contained air supply.	
V. <u>Evacuation or Escape (no concentration limit)</u> <i>KNOWN OR FROM UNKNOWN</i>		
	1) Self-contained breathing apparatus in demand or pressure demand mode (negative or positive pressure).	
	2) Full-face gas mask, front or back mount type with industrial size organic vapor canister. <i>w/appropriate gas or vapor</i>	
	3) Mouthpiece respirator with escape type organic vapor canister. <i>canister. (escape type gas mask)</i>	



To: All Air Supplied Distributors
All Air Purifying Distributors

Subject: NIOSH

Now that the dust has settled, and the air has cleared, it may be safe to attempt to provide an explanation of what happened, and is happening, in the field of respiratory equipment relative to NIOSH.

Bureau of Mines approved equipment, approved under the following schedules, is considered permissible for continued use if purchased on or before September 30, 1974 until the following:

Self-contained	approved under 13-13E	March 31, 1979
Gas Masks	approved under 14F	March 31, 1977
Supplied Air Respirators	approved under 19B	March 31, 1980
Filter Type & Chemical Cartridge Respirators	approved under 21B or 23B	March 31, 1976

(It is the user's responsibility to maintain the equipment in an approved condition.)

After September 30, 1974, manufacturers are restricted from producing equipment, as approved, to any of the above schedules, UNLESS the individual manufacturer has a NIOSH approved quality control plan. If he has this approved quality plan, he may supply the equipment until March 31, 1975. The same timetable applies as to its discontinuance date.

After March 31, 1975, the only approved equipment that can be supplied will have to be approved under 30 CFR Part II, and bear NIOSH approval.

We are confident that you will be able to upgrade your self-contained equipment manufactured under the 13E schedule to the new requirements. Be aware that you do have five years before such an update would be required. As soon as we have more information as to an upgrading, you will be notified.

We will do whatever we can where possible, to upgrade your customer's other respiratory equipment.

Cordially yours,

Ronald C. Voisard
Manager, Distributor Development
and Technical Services

df
cc: Regional Managers

100450

10-31-74

John

Minnacci called 10-29-74 saying:

① He has talked with Vorward of Scott.

Scott Aviation wants no part of modifying our existing half face piece air line masks. True, there'd be more air flow but the rating wouldn't be improved. Their legal people won't let them modify the masks.

② New Scott Air Paks, Presur-Pak II

10-12 wks delivery

③ The air line masks we talked about on 10-24-74 To meet OSHA standard 11A

He confirms they are awaiting NIOSH approval. Will confirm pricing in a few days

10-12 wks delivery

④ He urges us to place orders for whatever we want so as to be at the head of the line when orders are filled.

mt

100451



October 28, 1974

TO: All Air Supplied Respiratory Distributors

VINYL CHLORIDE

The Federal Register, Volume 39, Number 194, part 11, dated Friday, October 4, 1974, contains the Standard for Exposure to Vinyl Chloride.

I have copied the following portions of that standard for your edification and use:

(c) *Permissible exposure limit.* (1) No employee may be exposed to vinyl chloride at concentrations greater than 1 ppm averaged over any 8-hour period, and

(2) No employee may be exposed to vinyl chloride at concentrations greater than 5 ppm averaged over any period not exceeding 15 minutes.

(3) No employee may be exposed to vinyl chloride by direct contact with liquid vinyl chloride.

(g) *Respiratory protection.* Where respiratory protection is required under this section:

(1) The employer shall provide a respirator which meets the requirements of this paragraph and shall assure that the employee uses such respirator, except that until December 31, 1975, wearing of respirators shall be at the discretion of each employee for exposures not in excess of 25 ppm, measured over any 15-minute period. Until December 31, 1975, each employee who chooses not to wear an appropriate respirator shall be informed at least quarterly of the hazards

of vinyl chloride and the purpose, proper use, and limitations of respiratory devices.

(2) Respirators shall be selected from among those jointly approved by the Mining Enforcement and Safety Administration, Department of the Interior, and the National Institute for Occupational Safety and Health under the provisions of 30 CFR Part 11.

(3) A respiratory protection program meeting the requirements of § 1910.134 shall be established and maintained.

(4) Selection of respirators for vinyl chloride shall be as follows:

<i>Atmospheric concentration of vinyl chloride</i>	<i>Required apparatus</i>
(i) Unknown, or above 2,000 ppm-----	Open-circuit, self-contained breathing apparatus, pressure demand type, with full facepiece.
(ii) Not over 2,000 ppm-----	(A) Combination type C supplied air respirator, pressure demand type, with full or half facepiece, and auxiliary self-contained air supply; or (B) Type C, supplied air respirator continuous flow type, with full or half facepiece, and auxiliary self-contained air supply.
(iii) Not over 100 ppm-----	(A) Combination type C supplied air respirator demand type, with full facepiece, and auxiliary self-contained air supply; or (B) Open-circuit self-contained breathing apparatus with full facepiece, in demand mode; or (C) Type C supplied air respirator, demand type, with full facepiece.
(iv) Not over 25 ppm-----	(A) A powered air-purifying respirator with hood, helmet, full or half facepiece, and a canister which provides a service life of at least 4 hours for concentrations of vinyl chloride up to 25 ppm, or (B) Gas mask, front- or back-mounted canister which provides a service life of at least 4 hours for concentrations of vinyl chloride up to 25 ppm.
(v) Not over 10 ppm-----	(A) Combination type C supplied-air respirator, demand type, with half facepiece, and auxiliary self-contained air supply; or (B) Type C supplied-air respirator, demand type, with half facepiece; or (C) Any chemical cartridge respirator with an organic vapor cartridge which provides a service life of at least 1 hour for concentrations of vinyl chloride up to 10 ppm.

100452

(5) (i) Entry into unknown concentrations or concentrations greater than 36,000 ppm (lower explosive limit) may be made only for purposes of life rescue; and

(ii) Entry into concentrations of less than 36,000 ppm, but greater than 3,600 ppm may be made only for purposes of life rescue, firefighting, or securing equipment so as to prevent a greater hazard from release of vinyl chloride.

(6) Where air-purifying respirators are used:

(i) Air-purifying canisters or cartridges shall be replaced prior to the

expiration of their service life or the end of the shift in which they are first used, whichever occurs first, and

(ii) A continuous monitoring and alarm system shall be provided where concentrations of vinyl chloride could reasonably exceed the allowable concentrations for the devices in use. Such system shall be used to alert employees when vinyl chloride concentrations exceed the allowable concentrations for the devices in use.

(7) Apparatus prescribed for higher concentrations may be used for any lower concentration.

To date, the following classes of equipment have been approved by NIOSH which can be used to satisfy the requirements:

Atmosphere Concentration of VC

(i) Unknown or above 3,600 ppm	Pressure Demand SCBA	yes
(ii) Not over 3,600 ppm	(a) Pressure Demand Ska-Pak	*
	(b) Constant Flow w/SCBA	*
(iii) Not over 100 ppm	(a) Ska-Pak Demand - Full Facepiece	yes
	(b) Air-Pak*	yes
	(c) Demand Airline - Full Facepiece	yes
(iv) Not over 25 ppm	(a) Powered Air Purifying	*
	(b) Gas Mask	*
(v) Not over 10 ppm	(a) Ska-Pak - Demand, 1/2 Facepiece	yes
	(b) Demand Airline, 1/2 Facepiece	yes
	(c) Chemical Cartridge Respirator	*

*Equipment is being prepared for submission to NIOSH.

I will keep you posted.

Ronald C. Voisard

Ronald C. Voisard
Manager, Distributor Development
and Technical Services

100453

11-1-74

Basic unit has been in
to NIOSH. The aux.
unit is being
submitted
this week
NIOSH approvals

*Like any accept
full facepiece*

will be

3-21-74

8-215-376-6161

Willson Products
2nd and Washington St
Reading, Pa. 19603

Called Bob Fitterling - Willson Co. He turned me over to Ron Witman to answer my questions on the Willson respirators.

① We bought and have for distribution

R-685 respirators (Twin cartridge)
R-21 cartridges for organic vapors
R-10 Cloth for dust
R-683 Plastic caps to hold cloth

② How to know when cartridge is spent.

- No really positive, practical way.
- Some plants change each shift if cartridge is out of bag - even if man does not use it.
- Willson ~~tests~~ has test data on R-21 using CCl_4
 - 1000 ppm, 64 L/min thru 2 cartridges for 50 min. gives 5 ppm leakage
- I pressed Witman on a guideline that would be practical.
 - If man doesn't use cartridge but has it out of shipping container for a week - change cartridges
 - If used, it all depends on conc, time, breathing rate.
 - If in doubt, change cartridges
 - Send him 2 cartridges which were in polymer bldg 8 hrs/day, one week, but unused. He will test to see how much life is left (with respect to CCl_4 - he has no VCM experience). He will ~~re~~ call me the results.

100454

③ How to know when cloth is spent

- Filtration of dust causes cloth to actually get better. However, ΔP rises and cloth has to be changed when breathing becomes noticeably more difficult.
- R-10 cloth data
 - Silica dust at .4 to .6 μ is used to rate cloth
 - 32 L/min thru 2 cloths using 50 mg/m³ conc of silica for 90 min
Cloth is 99+ efficient
- R-13 dust & fume cartridge is even better since it also handles metal (lead) condensation particles.



225 ERIE STREET
LANCASTER, N.Y. 14086
TEL. 716 683-5100
TELEX 91-394

INSTRUCTION MANUAL

FOR USE OF

SCOTT RESPIRATOR

MODEL 800230

AND

MODEL 800448

100457

TABLE 1

RESPIRATOR MODEL 800230 (SEE FIGURES 2 AND 3 FOR TYPICAL RESPIRATOR)					SUPPORT EQUIPMENT		
MODEL PART NUMBER	COMPONENT PART NUMBER				STRAP & BELT ASSEMBLY PART NO.	LOW PRESSURE HOSE IDENTIFICATION CHART ORDERING GUIDE	
	REGULATOR	HOSE ASSY.	MASK ASSY.	GASKET		Part No.	HOSE LENGTH DETERMINED BY DASH NO.
800230-00	800227-00	26022-1 1*	801450-40 3*	2827-15	26025-1		
800230-01	800227-00	26022-3 2*	801450-40 3*	2827-15	26025-1		
800230-02	800227-00	26022-1 1*	801450-41 4*	2827-15	26025-1	30000-01 to -99 None	1 ft. to 99 ft.
800230-03	800227-00	26022-1 1*	801450-42 5*	2827-15	26025-1	30001-00 to -99 None	100 ft. to 199 ft.
800230-04	800227-00	26022-5 10*	801450-40 3*	2827-15	26025-1	30002-00 to -50 None	200 ft. to 250 ft.
800230-05	800227-00	26022-1 1*	801450-43 6*	2827-15	26025-1		
800230-06	800227-00	26022-3 2*	801450-41 4*	2827-15	26025-1		
RESPIRATOR MODEL 800448 (SEE FIGURE 4 FOR TYPICAL RESPIRATOR)							
800448-00	800227-00	26022-1 1*	800379-01 7*	2827-15	26025-1	30010-01 to -99 Hansen	1 ft. to 99 ft.
800448-01	800227-00	26022-3 2*	800379-01 7*	2827-15	26025-1	30011-00 to -99 Hansen	100 ft. to 199 ft.
						30012-00 to -50 Hansen	200 ft. to 250 ft.
						30020-01 to -99 Schrader	1 ft. to 99 ft.
						30021-00 to -99 Schrader	100 ft. to 199 ft.
						30022-00 to -50 Schrader	200 ft. to 250 ft.

- 1* Hose assembly uses coupling, part number 13 (Manufactured by Hansen Mfg. Co. Cleveland, Ohio)
 2* Hose assembly uses coupling, part number 2047 (Manufactured by A. Schrader & Son, Brooklyn, N.Y.)
 3* Scottoramic mask assembly with 5 strap head harness.
 4* Scottoramic mask assembly with tite-seal head gear.
 5* Scottoramic mask assembly with tite-seal head gear, and outlet valve and voice transmitter.
 6* Scottoramic mask assembly with 5 strap head harness, and outlet valve and voice transmitter.
 7* Oro-nasal mask assembly.
 8* Hose available in lengths of 1 to 250 feet.
 Example: 30011-50 indicates low pressure hose 150 foot length with Hansen fitting.
 9* Used in conjunction with a snorkle system, part number 31040
 10* Hose assembly uses coupling, part number B1-K11 (Manufactured by Hansen Mfg. Co. Cleveland, Ohio)

SECTION II

OPERATING INSTRUCTIONS

MANECCEI
874-4700

NOTE

The following "Operating Instructions" include the strap and belt assembly, and the supply hose (see Table I).

- Don the strap and belt assembly (refer to Section III).
- Check the regulator knob (1, figure 1) as adjusted full counterclockwise to its out position (this places the regulator in the demand position).
- Snap clip (2) into "D" ring (3).
- Connect supply hose (4) to the respirable air supply and mate hose assembly (5) to supply hose (4) as follows:
 - Hansen fitting mating (see figure 5).
 - Line up slight recess (drill point) in socket body "A" with the semi-circular cutout in spring loaded socket "B".
 - Slide spring loaded socket "B" back on supply hose; insert coupling "C" into socket body "A", and release socket "B".
 - Rotate socket "B" locking coupling "C" in place.

NOTE

To uncouple, rotate socket "B" until socket body "A" and socket "B" are lined up (refer to step 1); slide socket "B" back and remove coupling "C". Release socket "B".

- Schrader fitting mating (see figure 6).
 - Insert coupling "C" into socket body "A".

NOTE

To uncouple, rotate socket "B", remove coupling "C" and release socket "B".

- Bring mask and hose assembly over shoulder (see figure 1) and secure hose assembly in place with webbing loop (6).
- Don appropriate mask (refer to Section III).
- Adjust regulator knob (1, figure 1) if desired (clockwise adjustment of the regulator will now allow varying degrees of constant air flow into the mask).

100459

Respirators

- Max - Min in Storeroom for cartridges
- and respirators - Or keep in cupboard?
- Spare parts in cupboard?

- Instruction of men

cartridge = for vapors

cloth = for dust

change cartridges each ~~for~~ week. Some
change cloth when built up ^{if used} & breathing
is harder.

Reading Warning in box

- Does not supply Oxygen. Merely
filters vapors & dust. Filters out
slight vapor concentrations
- Cartridge is not giving protection
if you can smell vapors.

Keep clean

Carry it and use it when VC is
smelled or ~~dust~~ job is dusty.

- ① Put up Emergency Plans
- ② Red flasher lights (operated from E-2)
- ③ Authorized Personnel Lists issued
- ④ Daily Roster sheets (for E-2, C-1, C-2 whd, K)
- ⑤ Loud speaker in E-2 downstairs outside oasis.
- ⑥ Remind Supervision to review their Reminder Lists & start at midnight.
- ⑦ Give Supervision E-2 OSHA D/N Book.
- ⑧ Supply of Willson cartridges. Change end of shift
- ⑨ Signs & Labels
 - + Put yellow signs at Regulated Area entrances
 - Put up yellow signs for hazardous operations. How to use these? Red flashers mean area is hazardous.
 - Labeling paper bags
 - Labeling cans
 - ~~Put~~ Signs on vessels
 - rc tanks
 - Silos
 - Day Bin

⑩ D-245 people in K or C-2 100467

- ⑪ Have forms ready to send to OSHA about exposure — forms to cover us with respect to masks being worn as required during "exposure".